

Medical Economics

MARCH
1943

DR. DRAPER
DR. HAUSER
DR. BALLOCK
DR. IMPODEN
DR. MURKIN
DR. SCHARF
DR. STETTEN
DR. THOMPSON

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Some men are so clever!

Take my boss for instance . . .

Yesterday, I overheard him talking to another doctor about infant feeding.

"Jim," he said, "I'll tell you why you never have any time to spare. You get yourself tied up with a lot of unnecessary work."

"You believe in prescribing plain cow's milk modified. Haven't you found out that S-M-A* will save you a lot of unnecessary questions? Cut out a lot of bothersome arithmetic?"



"Heaven knows, we're busy enough as it is. I'll bet you couple of tickets for the big game that with S-M-A on the job—your patients won't have to telephone you so often to ask about their baby's formula."

* * *

Well, you can see why I think my boss is so clever. Why don't you try S-M-A in your own practice, doctor? See if you don't like it better.

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TO EACH OUNCE OF
WARM BOILED MILK
COMPLETES THE
FORMULA...
TWENTY
CALORIES TO
THE OUNCE

The infant food that is
nutritionally complete

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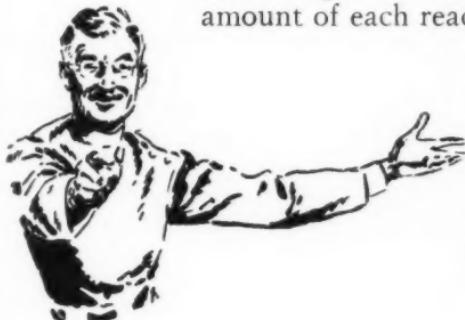
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Medical Economics

THE BUSINESS MAGAZINE OF

THE MEDICAL PROFESSION



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IN INFANCY—“...if the child has entered the world insufficiently endowed with iron, anemia is certain to result. There are three possible causes for a poor supply: (1) Premature birth... (2) sharing of the available iron by twins; and (3) an anemic mother who cannot supply the infant with enough iron.” *Food and Life*, U.S. Dept. of Agric.

IN PREGNANCY—“In a study of 158 pregnant women, Bethell found 53.8 per cent with a true anemia . . .” “Labate found 48 per cent of 881 pregnant women with hemoglobin values below 11.6 gm . . .” Russell M. Wilder, *M. D.*, *Jour. Am. Diet. Assoc.*, Jan., 1942.

IN LACTATION—“Iron deficiency anemia is almost as common among nursing women as it is during pregnancy . . .” *Food and Life*, U. S. Dept. of Agric.

NATURALLY, therapy in each case should be planned for certainty and speed of response. Because *copper is needed* to catalyze iron for hemoglobin synthesis, be sure to specify Foundation-licensed and tested Copper-Iron Compounds.

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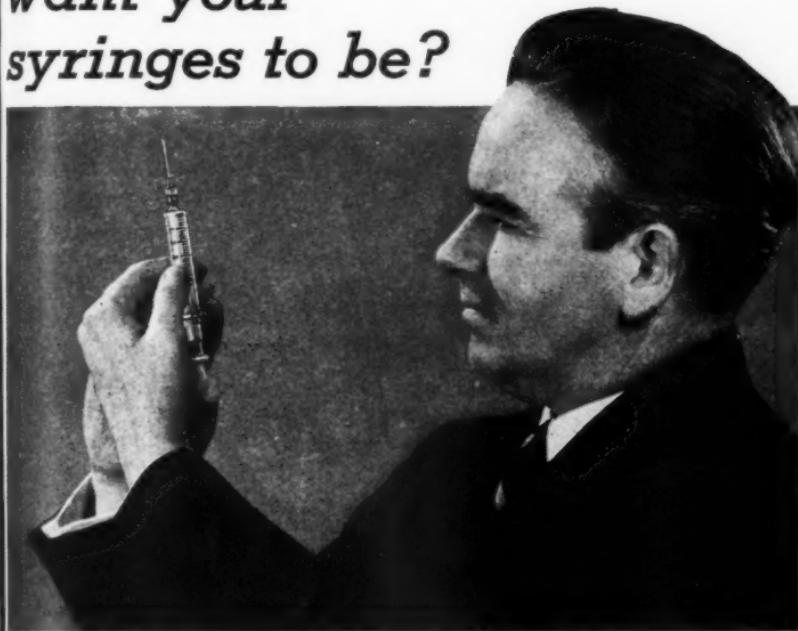
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Speaking Frankly

Referral Courtesy

An eye specialist who lives in my vicinity was recently called into the army. Since then his wife has been referring an occasional patient of his to me.

What would be the best way for me to repay this courtesy?

I'll appreciate suggestions from readers of MEDICAL ECONOMICS.

M.D., New Jersey

Needed: Licenses

Many internes are being ordered to report for military duty before having had an opportunity to take their State board examinations for licenses to practice medicine. Will these men be expected to take the examinations after the war, or will provisions be made for reciprocity upon discharge from the service?

Robert A. Crawford, M.D.
Chicago, Ill.

Elaborate arrangements have been made by the Office of the Surgeon General to avoid just such a contingency. It is endeavoring to keep accurate lists of State board examinations so as not to order an officer to active duty on completion of his internship if either the State in which he is interning or the State of his per-

manent residence has not yet given the examinations. It is probable that some internes have simply failed to avail themselves of the time given them to submit to such examinations.

What may be expected in the case of those who go on active duty before they take the examinations is open to question. The situation is currently being studied in connection with the overlapping of internships caused by the accelerated medical program. The army itself cannot, of course, dictate what shall be done in view of the question of States' rights.

Licensure Riddle

The choice of the State approach to the solution of licensure problems that may be presented by relocated physicians is sound and indicates wise understanding. The model bill drafted by the Federation of State Medical Boards should find ready adoption because it is permissive, temporary, and self-limiting.

The general adoption of this measure, the reciprocal relations existing between many States, and the certificate of the National Board of Medical Examiners (held by 10,000 physicians in this coun-

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Literature and a clinical supply on request

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try and acceptable to the licensing authorities of forty-four States should furnish the means to solve almost any licensure problem without Federal intervention.

E. S. Elwood, Executive Secy.
National Board of
Medical Examiners
Philadelphia, Pa.

No Office Rent Ceiling

Recently my landlord gave me notice that my office rent would be raised 25 per cent. Does rent freezing apply to office space?

Robert R. Nelson, M.D.
Charlottesville, Va.

The Office of Price Administration says that rent control applies only to private dwellings. Landlords are free to increase office rents by any amount.

A Refugee M.D. Speaks

"Sickness knows no citizenship." These words were written by Dr. David L. Edsall and Dr. Tracy T. Putnam, members of the National Committee for the Resettlement of Foreign Physicians. They bear repeating.

Every so-called refugee doctor

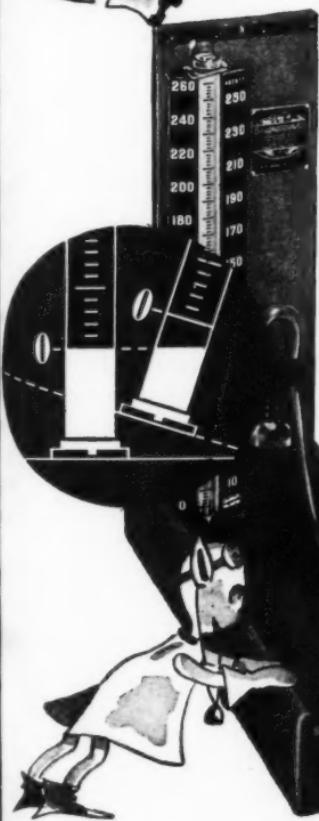
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Faster relief with a soda tablet that tastes like candy

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wants to do the best he can for this country, which gave him shelter and refuge and hope, and which will be his country after a number of years. Yet some journals have published attacks against him.

The fight has gone so far that one gentleman has proposed that no doctor be licensed until he has become a citizen. He argues that the safety of "this republic now in our hour of trial, depends on not allowing an infiltration of foreigners, who may be saboteurs or spies or may be engaged in subversive activities."

What kind of logic is this which suggests that the victims of dictatorship could ally themselves with their own foes?

Here and there some of our friends are asking why we do not enter military service. They should know very well that we would like to do so to show our thanks for the hospitality and kindness we have found in this country, but that military requirements often rule us out.

According to Drs. Edsall and Putnam, "It is not the European

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Action: Produces a mild hyperemia with an exudate of serum depicting the tissues, improving the breathing and yet it is soothing to the nose.

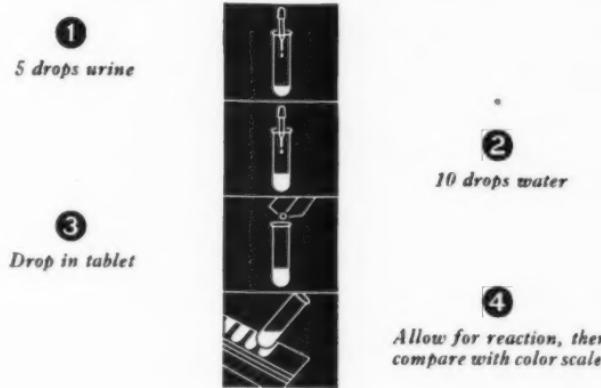
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physician who has changed, it is . . . the American attitude." These two courageous men have criticized the "deplorable effort to deny admission to foreign physicians," pointing out that "the only reason behind such rulings must be fear of competition or rank prejudice."

Let us say to our colleagues that we deeply regret the existence of this situation. We who came from abroad to start a new life are anxious to give our best to this country. Don't mistrust us. Have confidence in us. We like you, and we love this country. If you'll be fair to us, we shall not disappoint you.

Emil Glas, M.D.
New York, N.Y.

"Illogical, Inconsistent"

Why is a physician with real glycosuria (with a normal blood sugar and dextrose tolerance curve) excluded from service as a medical officer? I was rejected for this reason, though otherwise in good health and of optimum age (26). It does not seem logical, and certainly is not consist-

Heartburn

Faster relief with a soda tablet
that tastes like candy
Samples on request

Thousands of doctors are now prescribing a 6 grain tablet of sodium bicarbonate and aromatics called Carbox Bell. They report better results because Carbox Bell is so palatable the patient isn't aware he is taking soda. So efficient, relief comes in a minute or so. Doctors know there is no question of alkalosis, acid rebound, laxation or constipation in the 30 grain dosage. One trial proves its value. Samples to doctors from Hollings-Smith Co., Inc., Mfg. Chemists, Orangeburg, N. Y.

HOW SAL HEPATICA INCREASES LIQUID BULK



THE REPUTATION of Sal Hepatica as a mild yet thoroughly effective intestinal cleanser seems to grow brighter with passing time. It has long been known that Sal Hepatica flushes the intestines and initiates peristalsis through creation of temporarily unabsorbable *liquid bulk* in the bowel. New laboratory studies simply corroborate the literature on the "mechanism" of the action of Sal Hepatica salines. For example:

Sal Hepatica in laxative dilution was placed in one isolated canine ileal loop, a cathartic solution in another loop. After one hour in the peritoneal cavity, examination revealed that the laxative dilution of Sal Hepatica had gained 34% in volume, the cathartic dilution 204%.

Sal Hepatica aids in relief of certain types of gastric distress; it exerts helpful choleric properties to promote the flow of bile. Sal Hepatica makes a bubbling, pleasant drink. Literature on request.

← Graduate on left contains 5 cc. of Sal Hepatica solution as placed in ileal loop of dog. Graduate on right shows 6.7 cc. obtained after loop remained in peritoneal cavity for one hour. Inset depicts distended loops of dog's intestine filled with liquid bulk.



SAL HEPATICA

SUPPLIES LIQUID BULK TO FLUSH
THE INTESTINAL TRACT

Bristol-Myers Company, 19 W. 50th St., New York, N. Y.

ent with the pressing need for army doctors.

M.D., Oregon

"Layman Doctors"

Too many laymen are trying to be doctors.

Firemen who give pulmoton treatment in undiagnosed cases of heart failure should be indicted for murder. First-aid morons who steal the show in the presence of a doctor should be arrested for creating a bottleneck. Chiropractors, naturopaths, midwives, and faith healers should not be allowed to practice even in a free country like ours.

People with eye conditions have no business seeking help in jewelry stores. As good a case can be

made against the sale of third-rate lenses for eyeglasses as can be made against the indiscriminate sale of poison or other harmful agents.

Welfare personnel should study medicine before discussing it—especially before trying to be leaders in some kind of bureaucracy under which doctors and patients would have to jump at the crack of a whip.

Unfortunately, we doctors as a group do not seem to find the time to fuss with these problems.

M.D., New York

Pictures in this Issue

Pages 41-46, U.S. Army Signal Corps; 46 (top), Acme; 48, 49, Forbes magazine; 51, Three Lions.

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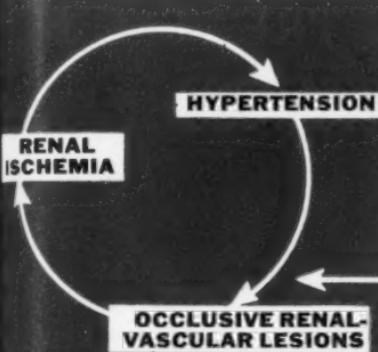
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Essential Hypertension in Man

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THE evidence that essential hypertension is due to primary renal vascular lesions is at present insufficient.¹ The belief that renal arteriosclerosis underlies most cases of essential hypertension is not considered to be in accordance with fact.² It has not been established that renal ischemia is a necessary condition for the production of hypertension.³

Until it can be demonstrated that human essential hypertension is without exception the counterpart of experimental renal hypertension, any therapy must be evaluated on the basis of results obtained in the treatment of human hypertension.

In the absence of specific treatment, any effective palliative measures that may be safely administered command the serious attention of the practitioner.

For symptomatic treatment, ALLIMIN is steadily and consistently gaining a wider acceptance by physi-

cians. Therapeutically, ALLIMIN has been found to be an effective and safe peripheral vasodilator for the control of elevated blood pressure. In practice, ALLIMIN has been found impressively useful for the alleviation of such symptoms as headache and dizziness that so frequently manifest themselves in hypertension.

ALLIMIN is safe and non-toxic. The administration may be maintained without fear of undesirable side-effects or untoward reactions.

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ALLIMIN is advertised exclusively to the medical profession. For newly published monograph on Hypertension and professional sample of ALLIMIN, sign and mail the Coupon.

Lancet, 1:34, Jan. 10, 1942.
J.A.M.A., 120:147, Sept. 12, 1942.
J. Missouri State Med. Assn., 39:237, Aug. 1942.

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SOLGANAL-B OLEOSUM (aurothioglucose), a gold compound of high therapeutic efficiency and low toxicity for the treatment of rheumatoid arthritis. Improvement has been reported in sixty-five to seventy-five per cent of cases. SOLGANAL-B OLEOSUM is administered intramuscularly in regular courses separated by rest periods. Complete information concerning the actions and uses of SOLGANAL-B OLEOSUM* may be obtained from the Medical Research Division.

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In many patients, depression may occur as an accompaniment of some more fundamental pathology, either organic or psychogenic. In such cases, the physician should bear in mind that, while Benzedrine Sulfate will not affect the underlying condition, its stimulatory effects may help to alleviate the concomitant depression which so often interferes with the management of the case.

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Benzedrine Sulfate is primarily useful in depressions characterized by apathy and psychomotor retardation, but is contraindicated in patients manifesting anxiety, hyperexcitability, or restlessness.

The use of Benzedrine Sulfate by normals should not be permitted; it should always be administered under the careful supervision of a physician; and depressive psychopathic cases should be institutionalized.

In treating depressed patients with Benzedrine Sulfate, the physician should bear in mind that any drug which produces pleasant or euphoric effects may prove to be habit forming—especially in unstable or neurotic individuals.

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Eliminate Foci Relieve Pain

Cumulation of clinical experience in arthritis treatment reveals that a well-planned course of therapy is desirable in all cases.

In conjunction with the administration of ERTRON, it is usually advisable to provide analgesic medication, particularly in the early stages. Chronic foci of infection should be eliminated where possible. Physical therapy is often useful.

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A file card containing dosage suggestions in detail is available to interested physicians.



LIVINGSTON,
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THE following articles, representing studies on hundreds of patients in hospitals, clinics and private practice, describe the results obtained with ERTRON therapy. These articles in reprint form will be sent to you on request.

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1. Many of us humans—some of your patients included—would like to have the dormouse's ability to fall asleep and forget the worries of the world.



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Sidelights

Hawkers of assorted "cures," surrounding themselves with a counterfeit atmosphere of medical practice, still do a thriving business in sporadic appearances around the country, according to reports from the Middle West.

The modern "barker" often holds forth at a counter in a large store. He wears a surgical gown and what passes for a learned air. A stethoscope frequently juts from his pocket. He lures and harangues crowd with frightening, half-restrained disquisitions on popular ailments, for all of which his miraculous elixir is touted as a swift remedy. This, of course, constitutes illegal medical practice and can be stopped by prompt punitive action.



"Every drugstore a medical information center" is pharmacy's present slogan.

Drug Trade News, in a cartoon reproduced on this page, personifies the pharmaceutical industry as a hustler in medical habiliments pinch-hitting for doctors. The drug trade's thesis is that, with civilian doctors becoming fewer, the demand for over-the-counter medical advice will grow,

and the pharmacist will become an increasingly important adjunct to the home-front physician.

Capitalizing this trend, McKesson & Robbins is promoting among pharmacists a nation wide plan to emphasize their stores' availability as centers of medical information. The program involves the sale of Dr. Morris Fishbein's book, "The Modern Home Medical Adviser."



Wartime needs have focused attention on the teaching of industrial medicine, with indications

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**You Can Always
Rely on
VIM NEEDLES**

- for their sharp *hollow-ground* points
- for their knife-sharp, keen cutting edges
- for their Square Hub security feature
- for their ability to resist rusting, clogging and corrosion so successfully
- for their fabrication from Firth-Bearley Stainless Cutlery Steel
- for their easy identification of gauge numbers, plainly stamped on the hub
- for their true economy, based on cost-to-USE
- for high, maintained standards of quality and craftsmanship

Your surgical dealer has all standard sizes of VIM Needles. Order them by name: "VIM".



that there is room for more courses in this timely field. The Long Island College of Medicine recently completed an orientation course that attracted fifty-nine physicians, nurses, and industrial aides and brought numerous inquiries from medical schools and societies. The students first surveyed the organization and activities of medical departments including physical examination, absenteeism studies and the assessing of pertinent human factors. This was followed by lectures and clinical demonstration on accidents and their prevention, toxicology in industry, nutrition and traumatic surgery. Five graduates of the course went on to a month's internship in the field. At least one doctor had a position waiting for him in a war-production plant.



Surgeons who took part in the Community War Fair in Washington not long ago gave an unexpected demonstration of the truism that things are not always as they seem. The operations performed in public were sheer pantomime, but some members of the audience refused to believe there was no genuine skin-cutting.

Witness this letter from a surgery fan:

"This is an unusual request, but I would appreciate a reply.

"The writer attended the War Fair. Everything seemed to be honest and aboveboard, but I have been told that the operation pa-



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WITH VITAMIN B₁
A GOOD GENERAL TONIC

IT has been authoritatively stated that, today, there are millions of nutritionally deficient workers in our production army, men and women who need "a good general tonic."

Endoglobin is a palatable and skillfully blended combination of iron, as iron peptone, liver substance, fresh beef blood (government inspected) and glycerophosphates, in a non-alcoholic, sugar-free medium. The beef blood is so treated as to permit easy assimilation of the cells. Vitamin B₁ has been added for its known therapeutic value. It's safe for the whole family, from baby to Gramps, effective in teaspoonful doses—and economical to the last drop.

Prescribe ENDOGLOBIN when "a good general tonic" is indicated.

HOW SUPPLIED—8 oz. and 16 oz. bottles.

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RICHMOND HILL
NEW YORK

formed on the woman between 3 and 4 o'clock for appendicitis was faked, that she had on a Rubber Stomach, and that no real operation was performed. I find it impossible to believe this, because the doctors explained every detail so distinctively."

The only actual blood-letting at the fair occurred when one of the surgeons, his mind evidently on that priceless audience, accidentally nicked his "patient" with a scalpel.



Almost every day now, legislation is proposed, or is under discussion, that involves, in some degree, the vital interests of physicians.

In States where legislatures are in session, the risk of restrictive enactments is superimposed on the constant possibility of Congressional measures that may determine the shape of things to come. It is no small task for a busy doctor to attempt to keep in touch with these complex currents; yet it is self-evident that his conscience must impel him to do so.

It is not sufficient to leave the vigilance entirely to the regional, State, or national associations. Frequently the most effective intervention—in support or opposition to pending legislation consists of the cumulative weight of responsible individual expression. Moreover, there is no more efficient brake on the impulses

UNUSUALLY EFFECTIVE COUGH THERAPY in

Acute and Chronic Bronchitis, Laryngitis, Whooping Cough, Paroxysms of Bronchial Asthma, Dry Catarrhal Coughs and Smoker's Cough

The four-fold pharmacodynamic action of PERTUSSIN (a saccharated Fluid Extract of Thyme, process Taeschner) provides effective aid in the relief of coughs, because:

1. It stimulates tracheobronchial secretion.
2. Thereby improving ciliary action, and

3. Aiding in liquefaction of mucus.
4. It depresses the cough reflex.

Pertussin is entirely free from bromides, opiates, chloroform and creosote. Its palatable taste and freedom from any undesirable side actions should recommend its use along with other medication you may prescribe for your patients.

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Prescribed for over 30 years

SEECK & KADE, Inc.

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Fear or extreme apprehensiveness are conditions that must be dealt with in the majority of surgical patients, especially the younger ones, and for this reason preoperative sedation is generally a desirable measure. 'Delvinal' Sodium Vinbarbital Sodium has proved exceptionally useful for this purpose, inducing a smooth transition from tense wakefulness to restful quiet and sleep.¹

When 'Delvinal' Sodium is administered preoperatively, the amount of anesthetic may be reduced by one-quarter to one-third, and the incidence of vomiting is lowered.² Moreover, by means of

'Delvinal' Sodium amnesia and rest may be obtained postoperatively, and other advantages associated with the use of this preparation in surgical anesthesia are economy of time and opiates.

'Delvinal' Sodium is also indicated for the relief of functional insomnia and various psychiatric conditions, as well as for obstetric sedation and amnesia.

Supplied in dry-filled capsules of three strengths: $\frac{1}{2}$, $1\frac{1}{2}$ and 3 grains.

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INHALED
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Direct, repetitive action! Therein lies Vapo-Cresolene's notable efficacy. With the Vapo-Cresolene lamp in operation, the patient's breathing draws the decongestive, mildly antiseptic, sedative vapors into repeated contact with the inflamed respiratory mucosa.

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As Vapo-Cresolene avoids the alimentary tract, there is no appetite depression. Hence, it is especially adaptable for use with any nutritive regimen. Prescribed also for symptomatic relief of spasmodic Croup and Bronchial Asthma. Write for physician's literature, Dept. 7.



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legislatures than the consciousness of having wide-awake constituencies.

Physicians who have served conspicuously as legislators have demonstrated the profession's capacity for judicious, forward-looking intelligence in public affairs. That capacity may be exercised from your office desk as well as from the legislator's rostrum.



People are often puzzled by the army's embargo on the publication of such seemingly harmless statistics as the extent of minor epidemics in camps and the number of cases of specific disabilities and illnesses. The very valid reason for this reticence throws light on the resourcefulness of modern military intelligence. For if the enemy could learn that there were, say, forty cases of scarlet fever at a certain military base, he need only refer to actuarial tables—giving the percentage of any group likely to contract a given ailment—and thereby compute the number of men stationed at that center.

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Faster relief with a soda tablet that tastes like candy

Samples on request

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THE fighting men and the civilian populations of the United Nations are protected with the finest anti-aircraft defense in the world.

The ability of anti-aircraft gunfire to keep enemy planes high—to bring enemy planes down—depends on effective controlling mechanism. Its "eyes" are the Anti-Aircraft Height Finder. Designed by Americans made by Americans, this intricate observing and computing instrument is part of the "mechanical brain" that makes aiming, fuse setting and firing of anti-aircraft guns a matter of automatic precision.

The Anti-Aircraft Height Finder is but one of many Bausch & Lomb optical instruments used on fighting fronts to hasten

Victory. Back of the lines, too, Bausch & Lomb products—such as Microscopes, Metallographic and Spectrographic Apparatus, Contour Measuring Projectors, are speeding production of vital war materials. And in factories American men and women are working longer, more effectively and with less fatigue because their eyesight, corrected through the professional and technical skills of eyesight experts, is kept at top efficiency.

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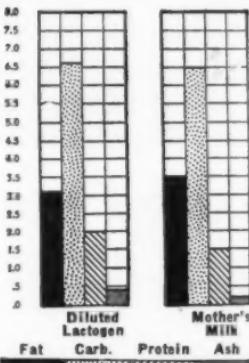
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THE cows' milk used for Lactogen is scientifically modified for infant feeding. This modification is effected by the addition of milk fat and milk sugar in definite proportions. When Lactogen is properly diluted with water it results in a formula containing the food substances—fat, carbohydrate, protein, and ash—in approximately the same proportion as they exist in women's milk.

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"My own belief is, as already stated, that the average well baby thrives best on artificial foods in which the relations of the fat, sugar, and protein in the mixture are similar to those in human milk."—John Lorett Morse, A.M., M.D., *Clinical Pediatrics*, p. 156.

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Eskay's Neuro Phosphates



Each adult dose, 2 fluid drams (2 teaspoonfuls), contains in acid state:

Alcohol 15 per cent
Strychnine glycerophosphate,
anhydrous $\frac{1}{64}$ grain
Sodium glycerophosphate . 2 grains
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This formula even on paper, instantly appeals to the physician as a judicious combination of recognized tonic ingredients. But the product itself is far more than a formula on paper.

Its scrupulous compounding, delicate balance, and outstanding appearance and palatability combine to give Eskay's Neuro Phosphates *an additional something*—a something which has been clinically proved.

Doctors have been prescribing Eskay's Neuro Phosphates for more than 30 years. *They prescribe it because it works.*

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DEFECTIVE TONICS . . .

Eskay's Theranates

The Formula of Eskay's Neuro Phosphates, plus Vitamin B₁

Each adult dose, 2 fluid drams (2 teaspoonfuls), contains in acid state:

Alcohol 15 per cent

Strychnine glycerophosphate,
anhydrous $\frac{1}{4}$ grain

Sodium glycerophosphate . 2 grains

Calcium glycerophosphate . 2 grains

Phosphoric acid 1.5 minimis

VITAMIN B₁ (thiamine hydrochloride) (.75 mg.) 250 U.S.P. Units



and this formula answers the insistent demand by physicians for a second tonic, embodying the clinically proved formula of Eskay's Neuro Phosphates, *plus Vitamin B₁*.

Eskay's Theranates is not intended to replace Eskay's Neuro Phosphates. It is, rather, particularly indicated where the physician suspects a B₁ deficiency.

An exceptionally large quantity of Vitamin B₁ has been added to Eskay's Theranates—the equivalent, in adult dosage, of 750 U.S.P. Units daily.

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Pruritus Ani



"with its torture of sleepless nights,
exasperating annoyances, and the sapping
of nerve poise and courage^(*) . . ."

No patient need suffer the torturing discomfort of pruritus ani, either at night or during business hours. Through the use of Calmitol Ointment, welcome relief is obtained for many hours. Thus restful sleep and recuperation follow, obviating the nervous irritability of sleeplessness. Easily carried about and applied when required, Calmitol Ointment may be used any time when the pruritus recurs. By breaking the vicious cycle of a lowered cutaneous threshold induced by sleeplessness, Calmitol reduces the severity of attacks and facilitates corrective therapy. Physicians are invited to send for samples.

*Hermanze and Bacon, Cyclop. of Med., X:1135.

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Calmitol exerts its antipruritic influence by blocking cutaneous receptor organs and nerve endings. Its active ingredients are chlor-iodo-camphoric aldehyde, levo-hyoscine oleinate, and menthol, incorporated in an alcohol-chloroform-ether vehicle. Calmitol is protective, bacteriostatic, and induces mild active hyperemia.

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Editorial

Is Medicine a Profession?

The Supreme Court ruling against the American Medical Association left at least one important question unanswered. The court sidestepped the issue of whether the practice of medicine is a learned profession or a trade, a decision that the AMA was anxious to get.

On the other hand, the court made it quite clear that Group Health, Inc., a government medical service cooperative, was operating "within the sphere of business." Because the AMA interfered with the activities of this group, the association was declared guilty of restraint of trade under the Sherman Anti-Trust Act.

The refusal of the court to clarify the status of the AMA is more significant than might appear at first blush. The AMA has always assumed that it enjoyed the same immunity from prosecution under the anti-trust laws as labor unions. Organized labor has contended successfully on more than one occasion that its activities are protected against anti-trust action by the Clayton and Norris-LaGuardia

acts. Ironically, labor has abused its privilege more than once and has gone scot-free. Its acts of boycott have often been far more blatant than the one charged against the AMA.

Some physicians declare there is danger that the general public will misinterpret the Supreme Court decision to the detriment of the profession. They believe many a layman will assume that organized medicine opposes sickness insurance of every type. Newspaper accounts, they say, gave the impression that Group Health, Inc. was representative of all plans bearing similar names; in fact, a day or so after the decision was announced, the papers came out with stories predicting that cooperative medical plans would boom as a result of the action.

The profession will probably have a big job on its hands to see that the public gets the facts straight. Meanwhile, we can be sure that Government-sponsored sickness insurance groups will take full advantage of the situation. —H. SHERIDAN BAKETEL, M.D.

Ways to Boost Your Percentage of Collections-on-the-Spot

An M.D. tells the steps by which he collects cash for office visits



"In God we trust. All others pay cash."

Many a lunchroom owner will testify that this succinct sign, tacked on the wall, silences the glib wayfarer who might otherwise try to parlay a dime into a T-bone steak. While I don't contend that the sentiment is suitable for display on professional walls, I do feel the principle is one which we can re-examine with benefit.

Maybe you don't make much effort to collect for your services at the time they're rendered. Certainly plenty of doctors don't. "It seems over-eager, almost mercenary." "I want to leave all that to my secretary so that I can concentrate on medicine."

These and similar reasons are adduced by physicians to explain their neglect. They don't realize, perhaps, that what they're explaining chiefly is the origin of the folklore that physicians are incompetent businessmen.

Let's look at the other side. The collection losses of doctors in private practice probably average somewhere between 20 and 25

per cent.* In other words, almost a quarter of the money doctors earn never reaches their pocket. This statistic, moreover, takes account of the labor and difficulty which goes into collecting the portion which is collected. Note the implication:

If you can achieve an increase in your percentage of cash collections, and if you can concentrate this increase among patients in the doubtful-pay category, the result will be a substantial boost in income actually received. A welcome by-product will be a reduction in the office time spent on month-by-month collection drudgery.

There are other very real advantages to immediate collection. The fee is paid at what is, from the patient's viewpoint, the most painless time psychologically. His sense of obligation is strongest when the service is rendered, and from then on it grows progressively weaker. If he isn't willing to pay then, he's still less likely to do so later.

*According to MEDICAL ECONOMICS' Survey of Medical Practice for 1939, a sample of 7,079 physicians in active, private practice collected an average of 78 per cent of their accounts.—THE EDITORS

pay later. A related advantage to payment-on-the-spot springs from another psychological quirk: The paid-up patient, as most of us have observed, is far more certain to return than the man whose indebtedness remains unpaid.

How can you increase your percentage of cash collections? There are a number of simple little procedures that may help you. Which ones will prove most useful depends on several variables: the nature of your practice (general or specialty, and which specialty), whether or not you have an able secretary, and the kind of community you practice in. Probably none of the expedients suggested will be tailor-made for your particular circumstances. But the basic principles are generally applicable.

The first step (an exceedingly important one) is to examine your own attitude toward cash collections. Get over the curious idea that mentioning fees is somehow slightly shameful or a breach of good taste. Remember that the more you seem to be airily indifferent to payment, the more likely the patient is to become infected with the same attitude. People tend to accept a man's evaluation of himself; and if your manner seems to say your services aren't worth much, the interpretation may occur to others. I'm not advocating a policy which has the faintest flavor of varice. The point is merely this: A doctor who quite sincerely says

"Let's forget all about fees and concentrate on treating that condition of yours" may find that a portion of his patients *will* proceed to forget all about fees—permanently.

Now, look at some specific cases. First, here is how a capable secretary may handle different situations where, for one reason or another, immediate collection is deemed desirable:

As Mr. Benson comes out of your office, donning his overcoat without evident intention of mentioning payment, the secretary intercepts him. Perhaps she asks: "Shall I make another appointment, Mr. Benson?" Then, once he's halted, she looks at him pleasantly and says "The fee for this visit is \$5. You may pay me if you wish. . ." Properly handled, this approach alone will collect many fees that might otherwise require repeated mail efforts.

In the art of cash collection, suggestion plays a major part, and a receipt-book is often useful to implant that suggestion. Offering a receipt for every office payment lends the impression that payment is *expected*. If the patient is unprepared to pay, filling out a receipt places on him the burden of explaining and promising subsequent payment.

If for example a new patient who appears to be a dubious credit risk asserts that payment is a little awkward at the moment, the secretary may say: "That's quite

[Continued on page 130]

Government Planners Visualize An American Beveridge Plan

A complete national health service seen as part of social reform

Social security benefits exceeding in liberality even those of Britain's Beveridge plan are promised the United States in a program drawn up for President Roosevelt by the National Resources Planning Board



Labor Secretary Frances Perkins, who predicted last month that "within weeks or even days" an expanded "cradle-to-grave" social security program similar to the Beveridge plan would be sent to Congress by the President.

in cooperation with the Social Security Board.

Originally earmarked for early action by Congress, the program has been temporarily sidetracked in favor of more urgent issues. Capitol Hill observers believe however, that it will be given careful attention within the next few months.

No detailed accounts of the scheme have yet been made public. But Secretary of Labor Frances Perkins, Social Security Chairman Arthur J. Altmeyer, and a few Congressmen have given broad hints of what is in the offing. According to these sources, Congress will be asked to revamp the Social Security Act to include the following:

1. Hospitalization at state expense for all persons covered by the law. (Some onlookers, suggesting that a medical plan of wider scope is contemplated, insist that "national health service" is a better description of this provision.)

2. Funds for the permanently disabled, the chronically ill, and

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persons otherwise unable to work although not aged.

3. Maternity grants.

4. Increased old age pensions.

5. Extension of old age benefits to about 25,000,000 more people, including agricultural workers, professional workers, seamen, government employes, and domestic help.

6. Extension of the period of time during which the unemployed may draw benefits.

7. Creation of a system of child care to cover children living with their parents as well as the homeless.

There is apparently a wide difference of opinion with regard to the probable cost of the new program. Miss Perkins estimates it would cost about 10 per cent of the nation's payroll for the first ten years. Thenceforth, she says, any cost above that amount would be paid out of general government revenue. Others familiar with the program predict an annual cost of 8 per cent, in which event approximately \$6,333,680,000 would flow into the Treasury each year that the 1942 wage and salary level prevailed. (Under the present law, 5 per cent is assessed against payrolls, netting the Treasury \$3,958,550,000 a year.)

There are a number of interesting parallels between the Beveridge plan and the American proposal. Both call for a unification of social services. The British report advocates that all benefits be administered by a new Ministry

of Social Security. Supporters of the American plan would like to see a new cabinet member appointed to direct the program. In other words, social security would be nationalized instead of operating on a Federal-State basis. British and American plans both recommend elimination of the so-called means test by which recipients of benefits must prove their need.

There are also a number of differences between the British and American proposals. For example, the Beveridge report urges that unemployment benefits be paid to persons until they are able to find jobs. Under the American system such funds would be paid for not more than twenty-six weeks. The British plan calls for outright socialization of medicine. The American scheme does not go that far—yet. American payments for nearly all benefits would be substantially larger than British grants.

Organized labor appears to be solidly behind social security expansion. The American Federation of Labor has gone on record as favoring a 10 or 11 per cent tax on payrolls with the understanding that benefits will be widely liberalized. The Congress of Industrial Organizations has taken a similar stand. The CIO's legislative program for 1943 contains the recommendation that there be established "a national health program which would include insurance for medical care on a Fed-

eral basis covering all persons and families, with free medical care for those who cannot afford insurance."

As of last month, President Roosevelt's immediate plans for expanding the social security system were not clear. Early in the year he told a press conference that his annual message to Congress would contain a recommendation that the legislators act without delay on the proposal. His message, however, contained only a veiled reference to the issue. Recently he told another press conference that certain matters of more pressing concern should take precedence over social legislation. Meanwhile, his basic sentiments with regard to social security expansion are probably reflected in the report drawn up by the National Resources Planning Board. This group was appointed by the President and is responsible to him alone.

Clamor for social security extension has been heard not only on the national front. New York State Democrats, for example, have announced they will work for creation of a "Beveridge commission" to study post-war social reform for the State. Party leaders advocate, among other things, establishment of a State medical program under which all citizens would be able to receive complete medical service plus a small income during periods of disability. Patients would be permitted to select their own doctors, but no oth-

er details have been announced.

William Hodson, New York City Commissioner of Public Welfare (who was killed recently in an airplane crash) stirred up a hot controversy not long ago when he declared that "The time will come when medical care will be as free as the air. It will be one of our greatest utilities. The principles of the Beveridge report are just as applicable in the United States as they are in Great Britain or any other country."

The opinion expressed by the late Mr. Hodson is not an isolated signpost. Social security expansion has apparently captivated the imagination of a large group which believes that drastic reorganization of the national economy is necessary, especially in the post-war era.

But social security liberalization in this country (as in Britain) is by no means an accomplished fact. The Republican delegation in Congress will be a powerful deterrent. Newspapers, the radio and Congressmen themselves have already attacked the argument that high-cost social security now would aid the war program by reducing purchasing power. If spending must be curtailed, they say, it should be done openly and not under the guise of social reform.

A showdown on social security expansion can safely be predicted. When it takes place, the Nation will be treated to a knock-down-drag-out fight. —GEORGE B. FRITZ

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Your Legal Questions Answered

Liability of minors, insurance companies, widows, accident victims, and others



Q. A divorced wife summons Dr. A to attend her child. Her ex-husband compels her, against her wishes, to dismiss Dr. A and call Dr. B. Who is responsible for Dr. A's bill?

A. If under the divorce agreement or decree the husband has provided the wife with adequate funds to cover medical expenses for the child, she is liable to Dr. A. If the husband has not provided the wife with such funds, he is liable. Under the law, a father is responsible for bills for medical care rendered to his child. When a divorce status exists, the liability of the father depends on whether or not he has provided money in advance to pay the bills.

Q. Is an unlicensed graduate of a medical school entitled to use "M.D." after his name?

A. It depends on the user's motive. If his motive is to solicit medical practice in a locality where he is unlicensed, the degree may not be employed to achieve that end. Thus, the displaying of a shingle with the M.D. after his name would be illegal as it would definitely indicate that the degree

was being used to obtain patients. On the other hand, for all legitimate purposes, the M.D. may be used. It has been granted by a duly authorized school of medicine and is the doctor's property.

Q. Has a physician who has not graduated from a Class A medical school any legal rights against State boards, hospitals, and other agencies which he thinks have discriminated against him unjustly?

A. State boards, hospitals, and other agencies may bar graduates of non-Class A medical schools from their rosters. It has been ruled that recognition by such organizations constitutes a privilege and is not a matter of right possessed by the doctor. However, were other non-Class A graduates admitted and the complaining doctor barred, grounds for a claim of unjust discrimination might exist.

Q. How long after a case is discharged can a malpractice suit be instituted by a patient?

A. The period of time varies in different States from one to three years. In New Hampshire, the

State from which this question comes, the time limitation is two years.

Q. Suppose a youngster steps on a nail and his parents forbid administration of tetanus antitoxin. Should this fact be noted on the record card? Also, should a signed release be obtained?

A. If refusal to undergo prescribed treatment threatens to endanger the patient, that refusal should most assuredly be incorporated in the patient's case history for the protection of the physician in the event of a subsequent malpractice action. A signed release is also worth having—just in case. If a release is unobtainable, the written statement of a witness to the refusal is probably the next best thing.

Q. In my State a medical bill uncollected for five years is outlawed by the statute of limitations. Isn't there a legal technicality, however, which still permits a physician to sue the debtor in such a case if the debtor moved and if it was not possible to locate him until after the five-year period had elapsed?

A. Under ordinary circumstances the right to sue for a medical bill expires when the period of the statute of limitations expires. In order to preserve that right when the debtor has moved or for any other reason his whereabouts are unknown, the following procedure may be followed:

A lawsuit may be started prior to the expiration of the statute by drawing up a summons and other necessary pleadings. Obviously the debtor, who cannot be found, cannot be served. The summons and other papers are thus filed with the local authority charged with the service of legal papers. This person will hold the summons until he is able to serve them upon the debtor. For the period of time that he holds these papers the statute of limitation is suspended.

Q. If a patient dies without leaving an estate, can his insurance be attached for payment of fees owed to a physician?

A. If insurance left by a deceased patient is made payable to his estate, it becomes part of the assets of the estate, and therefore is subject to debts of the deceased. In such an event, the physician can collect. But if the insurance is made payable to an individual (which is more often the case), the money does not become part of the estate, and is not subject to debts of the deceased. This is the generally accepted law.

Q. A physician is called to the scene of an accident and treats the victim. The patient did not himself summon the doctor. There is no insurance coverage. Who is responsible for the bill?

A. The victim. If he was unconscious or otherwise unable to ob-

[Continued on page 120]



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Medical Replacement Center

A close-up of Camp Robinson, Ark., where new officers are trained



When a newly-commissioned army medical officer is designated for service with troops in the field, he is usually sent to one of the army's four medical replacement training centers. One of these is at Camp Robinson, Ark., not far from Little Rock. There officers are given

an intensive training course to prepare them for duty with tactical medical units.

During the month or two he spends at Camp Robinson, the officer is introduced to military life. He lives in a hutment like the one pictured on this page. It's only

nine feet square, but it's private; and it contains an electric bulb, a heater which burns natural gas, and a regulation army cot.

Almost everything he does is covered by military regulations. The army believes that medical officers who will later accompany medical units into the field require more actual military training than those who are assigned to, say, general hospitals.

An official bulletin issued to new men gives some idea of the discipline imposed: "All officers are

required to sleep on the post five nights each week. Officers are permitted to sleep off the post on Wednesday and Saturday nights unless detailed to some duty. All officers will sign out whenever they leave the post and sign in when they return. Post regulations in reference to wearing the uniform will be rigidly followed at all times, both on and off the post."

As soon as an officer reaches the camp he is placed in a medical department replacement pool which



Toughening up: A brisk daily session of calisthenics helps put pooled officers in condition for future duty in the field. They are also given daily instruction in close-order drill. Most new medical officers haven't even had as much previous military experience as high school R.O.T.C. They get it in a big dose at the replacement center.

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Official insignia of Camp Robinson's medical replacement training center appears on this pennant. It is maroon and white, and includes the words "Preservation, Restoration, Training." Metal insignia bearing the design in miniature are worn by commissioned officers on their shoulder straps and by enlisted men on their lapels.

serves as a reservoir from which medical men are drawn for active duty as they are needed. Although length of duty in the pool varies in individual cases, it seldom exceeds one month.

The officer works hard while he

is at the camp. He attends classes from eight in the morning until five in the evening, and he must often participate in conferences at night. The subjects he tackles include military courtesy and customs of the service, marches and



Classroom isn't a classroom at all in the ordinary sense of the word. Most instruction is by conferences rather than by lectures, and full use is made of visual education techniques. The list of subjects which officers must master today is a far cry from 1775 requirements. When the medical corps was formed in that year, its chief advice to doctors was to make sure wounded soldiers had fresh straw on which to lie.

bivouacs, map and aerial photograph reading, military drill, defense against chemical attack, camouflage, military discipline, sanitation, medical reports and records, rations, housing of troops, communicable diseases, mass immunizations, field supply of water, dismounted drill and interior guard, and supply of medical field

units in combat. To aid the officer in his studies he is given more than thirty field manuals and special bulletins. His instructors make use of movies, field trips, charts, slides, maps, and sand tables on which scale models are built.

The officer dresses in work clothes. He needs only olive drab wool shirts, olive drab wool trous-

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ers, canvas leggings, service shoes, and a garrison cap. The entire outfit costs about \$25.

After he has completed the course, he is given an opportunity to put what he has learned into

practice. He may have only a week or two for practice sessions, however, because he is then ready for field service wherever the army may happen to need him.

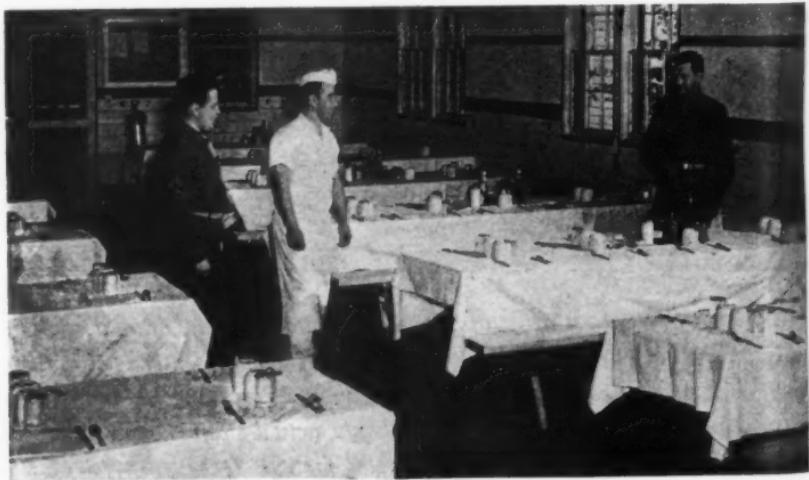
—ALLEN D. REBO, M.D.



The army way: Instructors teach medical officers the army version of leg splinting. An important function of the replacement center is to indoctrinate officers so they'll master the army way of doing things. Many newly-commissioned officers are impatient to begin actual professional activities. The army wants them to learn its formulas first.



Obstacle course: Medical officers bearing stretchers pick their way through a maze of wooden barriers. In actual battle enlisted men do stretcher duty, but officers must know the ropes anyhow. No obstacle course is officers' mess, which is served in the dining room pictured below.



When Your Patient Asks for a Note to the Ration Board

*Whether to comply with the request
and what to say if you do*



As meat, dairy food products, and canned goods join rationed ranks with gasoline, tires, and fuel oil, more and more patients seeking to bolster requests for extra allotments will besiege their physicians for written statements to submit to the rationing authorities. Here's a summary of the considerations to bear in mind when deciding whether or not to accede to these requests. Also presented are suggestions from the Office of Price Administration on what doctors ought to say in the certificates they do give patients.

It should perhaps first be pointed out that OPA regulations, forms, policies, and procedures are in a constant state of change. OPA officials freely concede that what is true at this writing may become untrue overnight; that the only certainty is change. Also to be borne in mind is the fact that rationing is not uniform nationally (at present, fuel oil is restricted in only certain States and pleasure driving in others) and that purely local circumstances may therefore often govern OPA requirements.

The local War Price and Ra-

tioning Board, composed, like the local draft board, of unpaid citizens, is the kingpin in the U.S. rationing system. It has wide discretionary authority to grant or to deny applications for extra allotments. With few exceptions, according to OPA higher-ups, the urban local board is likely to demand more explicit details in a medical certificate than is a small-town board. The reason of course is that the smaller the community the more likely board members are to know the individuals and circumstances involved. The board in a large city may also be motivated by the cynicism that—as one disillusioned official puts it—"for three dollars some doctors would sign anything."

In many communities, the board is aided in its evaluation of medical certificates by a local review committee, usually composed of a public health officer and two local doctors nominated by the county medical society. Says Joel Dean, OPA fuel-rationing director: "We know we can depend on your profession [to bring effective pres-

[Continued on page 124]

Getting More Out of Your Reading in Less Time

Better assimilation and a faster pace make "homework" easier



Do you blanch at the sight of the mounting pile of professional journals you must read to keep up with medical advances? If you do, take heart. For there *are* ways to



get more out of your "homework" in less time.

Systematizing your reading for better assimilation, and stepping up your reading rate are the primary methods. But first:

The success of any reading system depends on observing a fairly definite time schedule. This assumes the reservation of certain hours, or even entire afternoons or evenings, for serious study. Emergency calls, of course, may

interrupt you. So may a lot of other things—social engagements, for example. The job is to reduce them to a minimum. Letting it be known that you set aside fixed periods for reading may help appreciably.

Now the problem of assimilating what you read: This is fully as important as setting a definite reading period. Material may be assimilated by the following methods:

1. Underlining significant passages in the copy;
2. Summarizing findings on the appropriate page margins of related textbooks; and
3. Jotting down summaries of material read on small slips or cards.

The third method, being less commonly used than the first two, deserves some comment. Its principal advantage is that it provides a convenient index of material read over an extended period of time. An accumulation of the summary cards will resemble a deck of playing cards. They can be thumbed through quickly during spare moments at the office. The

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mere act of having recorded the material will often insure its being remembered. If it isn't remembered, the cards are there to refresh your mind. Once in a while, even the summary may not be enough, in which case it can be earmarked and the article it refers to can be reviewed. This memory-jogging is a real aid in preserving knowledge that might otherwise be forgotten.

Associating what you read with your own cases and experience is another aid to assimilation. Suppose, for example, you are reading an article on thyroid tumors. Your eyes pause at the phrase "rapidly growing discrete tumors." The association process begins. You may think: "Now how can any one tell that the nodules are really discrete? They may run together 'way under the skin. I must look for that in the Jarvis case."

Cooperative reading also furthers the assimilation process. Generally, it works this way: Two or more physicians divide their reading matter equally and each

reads his share. Then they gather to discuss the material. The chief advantage claimed for this method is that the individual member is more conscientious in his reading because of his obligation to the group as a whole. It's also pointed out that more can be cov-



ered when several doctors take on a reading job in cooperation.

So much for assimilation. The next problem is to accelerate your reading pace.

Speed in reading can often be accomplished with surprising ease. Those who have studied the process recommend these simple rules:

1. Clear your mind for action. Before starting to read, eliminate all deterrents to concentration. Don't begin immediately after eating; you'll be too relaxed. Wait until that well-fed feeling wears off a bit. Then go where it's quiet. Dismiss all unrelated duties and responsibilities that can be tackled later by noting them on a memorandum pad. Get yourself a reading chair that isn't too comfortable.

2. Set a time limit for each ar-



ticle. Limiting your reading time makes for better concentration. It may also facilitate comprehension.

3. Force yourself to read faster than usual—at least for a few minutes each day. You'll miss meanings at first; but chances are that within a week you'll start to gain in both understanding and speed. Tests have shown that many persons who once could read but 200 words a minute—when tackling average reading matter—were able to increase their reading rate to 500 words a minute. Although technical reading requires more time, training will result in a relatively faster rate there too.

4. Avoid word-for-word reading. To determine if you're guilty of this, read silently for five minutes. Then count the number of words you've read. Divide the number by five. If you get less than 175, you're probably a word-for-word reader.

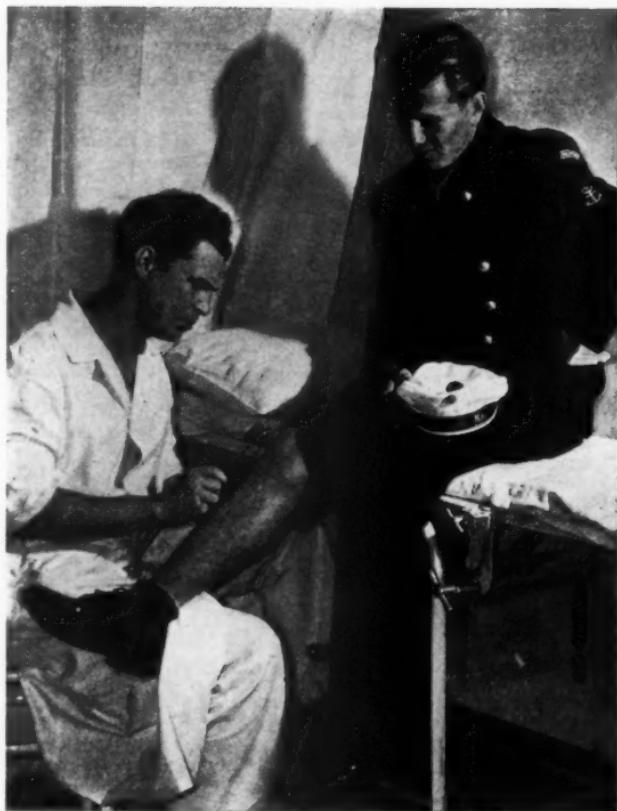
Another symptom that frequently identifies the word-for-word reader is vocalization. He pronounces each word to himself—sometimes with his lips, sometimes deep in his throat. If you suspect yourself of vocalizing, keep the fingers of one hand on your throat. The intermittent vibration will warn you. Vocalizing doesn't help you understand what you're reading. In fact, it may interfere with comprehension because the eyes move at least twice as fast as your vocal equipment can pronounce the words.

5. While reading, make fewer stops or "fixations." Training your eyes to observe this rule is one of the keys to rapid reading. Try reducing the number of stops you make with these exercises: (a) Force yourself to make your fixations *inside* a line. If you pause on the first or last word of a line, you waste much of the eyeful on the blank margin. (b) Read *vertically* through the middle of a column, giving each line just one glance on the way down. You probably won't grasp much at first but, with practice, your eyes will soon take in the greater part of the line at each glance—enough for comprehension.

6. Make it a practice to skip less important passages. Not every paragraph in an article is of value to you. So concentrate on the significant ones and gloss over the others.

Walter B. Pitkin offers a striking example of how much can be covered in a brief but regular period of daily reading—even by a person who isn't adept at fast reading. He estimates that such a reader, devoting forty-five minutes a day to technical material can read about 3,750,000 words a year—or 750 articles of 5,000 words each. Professor Pitkin computes the *average* speed for technical reading to be three words a second. But training, he declares, can step up the rate to five or six words a second.

Snatching a few minutes a day [Continued on page 125] they'd ma



Nine Days in an Open Lifeboat

Dr. Egede-Nissen (above, left), tells of rescue after being torpedoed



It was on the ninth day that they began to let go. Before that they'd had the strength somehow to stand watch and take care of the day wounded. Doing these things, 128 they'd managed to survive the cold

that numbed their flesh, turned their bones to ice, and brought visions of hearth-fires in a far-off homeland. . . But now a terrible and frightening weakness began to fall [Continued on page 114]



A Magazine Rack to Hold Your Waiting Room Periodicals

*One way to display reading matter
in an attractive, neat fashion*



Do your reception room magazines lie in a dog-eared heap on one over-burdened table? Must other patients wait while one of them thumbs through a thick pile for something to read?

If your periodicals look like old paper you're keeping to donate to the salvage drive, you may find it worthwhile to examine the maga-

zine rack pictured on this page.

The model illustrated was formerly an ordinary bookcase. Inexpensive, easily removable shelves were built into it at an angle. The result is a magazine showcase. Colorful covers ranged side by side in a display like this brighten any waiting room. And seven persons can select magazines

the same time without causing a traffic jam.

Such a magazine rack, rearranged before each office-hour period, gives an impression of neatness that patients can't help appreciating. Instead of a confused tangle of publications, they find a cheerful selection that's easy to choose from. By keeping your magazines in a periodical case, you also keep them from becoming prematurely tattered.

The rack illustrated has eight shelves. The five lower ones, set at an angle to display magazines, will accommodate a total of about thirty-six to a shelf. The three upper shelves (beyond convenient reach) can be used for books, flowers, and bric-a-brac.

If for any reason a magazine rack isn't practical in your office, it's a good idea at least to place periodicals in different parts of the room rather than concentrate them in one spot. Why? Because the atmosphere of tension sometimes present in a waiting room may be aggravated when patients crowd around a single stack of publications.

End tables with magazine shelves take up little space; several of them can be used as periodical stands. If you have a couch in your waiting room, you can match it with a sturdy coffee table able to hold additional magazines. A combination reading table and magazine rack of a type now on the market will also add variety to office furnishings. If

your magazines are on tables, they should not only be within easy reach but in piles small enough for patients to find what they want easily.

These are only a few suggestions. How you can solve your particular problem will depend to some extent upon the way in which your room is laid out and the kind of furniture you have. The important thing is to make some definite provision to display your periodicals in a neat and orderly way. The appearance of your entire waiting room is affected by the appearance of your magazines.

If you subscribe to a number of magazines, you'll want to guard against the occasional patient who surreptitiously makes off with waiting-room literature. You can discourage magazine pilfering by stamping the covers, and, say, every fifteenth page in your periodicals, with your name and address. Rubber stamps for this purpose are relatively inexpensive and can be bought at office supply stores and stationers. You can make this hint even more emphatic by stamping your magazines with the legend "From the waiting room of Dr. —".

Another expedient is to keep magazines in inexpensive binders like those seen in Pullman cars. Patients aren't likely to detach a magazine from its binder and certainly aren't likely to leave with the bound copy.

—GEORGE H. KERLER

New Medical Insurance Plan Is Launched in New York State

Health cooperative offers protection against "dramatic illness" costs



A new, low-cost sickness insurance plan designed for persons who fear "dramatic, cataclysmic illness" has been launched in the ten southern counties of New York State. More than 2,800 general practitioners and specialists in this area have agreed to participate in the program, which is administered by Group Health Cooperative, Inc. of New York City.

A unique feature, according to Winslow Carlton, executive director, is that physicians will be given an opportunity to help direct the project by joining the corporation. This they may do by purchasing a \$2 membership share, which entitles them to vote for members of the board of directors.

As far as benefits are concerned, the plan is similar to others in various parts of the country. It is frankly intended to cover only surgical and major cases because, Mr. Carlton says, "the public isn't yet willing to pay for comprehensive medical insurance."

Subscribers, drawn from employed business and industrial groups, are entitled to all types of

operations and after-care for specified periods, delivery of child and two weeks' aftercare, three weeks of non-surgical hospital treatment, and one bedside hospital consultation. Cost is 80 cents a month for a single person, \$1.50 for married couples, and \$2.00 for families. Full benefits, regardless of cost, are available to families earning \$3,000 a year or less. Higher income families receive credit on medical services according to an established schedule, and must pay additional fees, if any, to the doctor who treats them.

Participating doctors are divided into three groups and are paid on a fee basis, according to their classification. Specialists receive 100 per cent of fees stated in the contract; general practitioners who specialize in one or more fields receive 80 per cent; and general practitioners receive 66 2/3 per cent.

Group Health concedes the possibility that there may not be enough in the till to pay the claims of all doctors at all times. Physicians who join thus sign an agreement that they will limit

their claims to 75 per cent of the premium realized from subscribers in any calendar month. Moreover, they agree to accept as payment in full an amount, not exceeding the amount of their claim, that represents their share of all claims in any given month.

Here are some sample fees: appendectomy or exploratory laparotomy, \$100; simple mastoidectomy, \$100; tonsillectomy, \$35; chondromucous resection of nasal septum, \$75; leg fracture, \$75; delivery of child, \$70; cesarean section, including delivery, \$100; in-hospital consultation, \$10; in-hospital medical care, first day, \$10, second through fifth day, \$5 a day, and sixth through twenty-first day, a day.

In addition to premium income, Group Health receives grants from such institutions as the Rockefeller Foundation, the Twentieth Century Fund, and the Nathan Sofferheimer Foundation.

All licensed physicians in the southern New York counties are eligible to join. A medical advisory board of nineteen physicians, none of whom may participate in the plan, decides whether doctors are entitled to specialist, potential specialist, or general practitioner rating. Dr. Kingsley Roberts, long prominent in the medical co-op movement, is chairman. The plan has been endorsed by the county medical societies of Kings, Queens, and New York.

—WILLIAM R. BRUCE



Dr. Kingsley Roberts, chairman of Group Health Cooperative, Inc., and (below) Winslow Carlton, its executive director.



COLLOIDAL IRON

VS

IONIZABLE IRON



NON-IONIZING—EASILY ASSIMILABLE

FOR
THE
PALE
CHILD



IRON SALT IONS MAY IRRITATE STOMACH

IN the run down child, anemia and malnutrition are usually combined with digestive malfunction. In combating this triumvirate, colloidal iron has many therapeutic advantages over the iron salts. The salts (sulphates, citrates, etc.) are split up by the gastric juice with the release of ions likely to produce astringent and irritating effects. In the intestine, the iron ions form precipitates which are therapeutically inert, highly dehydrating, and constipating.

But the iron in OVOFERRIN is *colloidal iron protein*—not in ionic form. It is little affected by the gastric juice. It is stable and cannot irritate. Indeed it actually ap-

pears to stimulate the appetite. Most nutrient must be in the colloidal state to be absorbed. OVOFERRIN arrives in the intestines as a colloidal hydrous oxide which is readily assimilable and does not dehydrate or constipate.

Particularly important in the young patient, OVOFERRIN is practically odorless and tasteless and can stain tongue or teeth no more than can an iron nail. Its palatability is due to its colloidal state and not to sweetening or masking.

Prescribed in 11 oz. bottles: one tablespoonful at meals and bedtime in a wine glass of milk or water.

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PREScribe **OVOFERRIN**

COLLOIDAL IRON-PROTEIN BLOOD-BUILDER

In Secondary Anemia, Convalescence, Pregnancy,
"The Pale Child," and Run Down States

A. C. BARNES COMPANY

NEW BRUNSWICK, N. J.

"Ovoferin" is a registered trade mark, the property of A. C. Barnes Co.



Good Morning, Nurse!

That Truth often exposes herself through accident is nothing new. A fresh instance of this came to pass yesterday, the divine instrument being (Miss) Tillie Winsome, sadly miscast as the typist-secretary of our clinic.

A summary dictated in the case of a cardiac patient about to be discharged was transcribed and handed to me in this form:

"Response to mercurial diuretic has been satisfactory. Edema has disappeared in one wee . . ."

dangers of unexplored and hostile territory.



Somewhere, in a hitherto uncharted province of Alice's Wonderland, the local medical profession appears to have been exploring recently. An inkling of this event presented itself last week when I saw on a patient's chart the admitting diagnosis: "Diabetes mellitus, unilateral." This week, robust Willy Terriall came in to be hospitalized, presenting by way of full explanation a prescription blank on which his doctor had written with unabashed clarity:

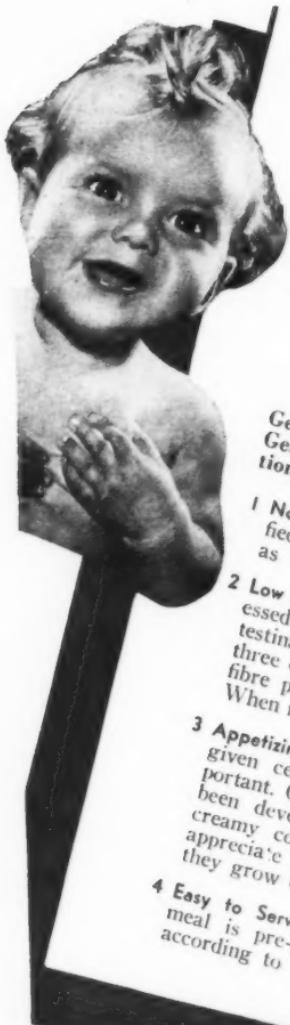
"Diagnosis: renal asthma."

I have yet to learn his meaning. Careful auscultation revealed no wheezing of either ureter.



The shifty-eyed gent leaned forward across my desk and thrust his left fist under my nose. I beheld the largest alleged diamond I had ever seen.

"Ain't nothin' the matter with me, Doctor. I dropped in to make you a proposition if you got some ready cash. See this stone? You



Babys First Food after Milk

A cereal with a
successful clinical record

Gerber's Strained Oatmeal, developed in the Gerber laboratories by qualified infant nutrition specialists, has four main advantages.

1 **Nourishing Values.** This cereal is fortified with Vitamins of the B complex as well as iron.

2 **Low Fibre Content.** This cereal is processed to be suitable for the delicate intestinal tract of infants as young as three or four weeks. The percentage of fibre present in the dry cereal is low. When mixed with milk it is even lower.

3 **Appetizing Taste.** When infants are first given cereal, consistency is very important. Gerber's Strained Oatmeal has been developed to mix to a smooth, creamy consistency. And how infants appreciate that good Gerber flavor as they grow older!

4 **Easy to Serve.** Gerber's Strained Oatmeal is pre-cooked. Simply add milk according to the consistency desired.



Gerber's Baby Foods

CEREALS

STRAINED FOODS

CHOPPED FOODS

GERBER PRODUCTS CO.
Dept. 223, Fremont, Mich.

Gentlemen:

Kindly send a complimentary sample of Gerber's Strained Oatmeal and a Professional Reference Card to the following address:

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ADDRESS

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"Well, you think?

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couldn't buy it in a store for a thousand bucks but it's yours for fifty. I ain't sayin' it's strictly on the up and up, but this 10 karats is just split off a big rock, and you ain't got a thing to worry about."

I demurred at this good fortune.

"Well, what's eatin' you? . . . Oh, you think it's a fake? Well, look!"

With one wide sweep he cut a vicious gash in my plate-glass desk top, and slammed out of the office.

I had no time to apologize.



Dr. Bill Sarada tells of the commotion caused on his tumor service by the recent premature publication of the use of egg-white for cancer. Within two hours after the appearance of the item in the afternoon paper, three separate movements had come to the fore among his patients, each with considerable collective support. They called for

1. Immediate representations to be made to the OPA and other authorities for diversion of eggs from lend-lease allotments and retain consumption to medicinal use exclusively.

2. The conversion of eggs to egg-powder, so that two dozen daily could be consumed by a patient, thus concentrating the effect for speedier cures.

3. Government subsidy of chicken farms, and establishment of a research institute to apply mass

production methods to outmoded individual egg-laying.



The aphasia of Charles Hornett and Frank Bigelow has been marked by the usual exasperation of the aphasic at his own failing.

Ever since the two were put together in K420, this anger has turned from themselves to each other; and all day a quarrel in double-talk goes on.

But the contest is unequal. Hornett's aphasia is mainly sensory; so Bigelow's insults in gibberish are wasted on him. Bigelow's aphasia is largely motor, and he suffers acutely from his impotence in the verbal battle.

If Bigelow's accompanying hemiplegia continues to improve, he will soon have to be moved to another room—before he makes use of the only answer to an unanswerable argument: a punch in the nose.



There are more things in clinical medicine than are dreamed of in a medical student's philosophy.

For quite a while, our X-ray department's gall bladder studies bore no consistent relationship to clinical findings. The dye was changed, the routine was carefully checked; still no visualization of the gall bladders could be obtained. It was a patient who supplied the clue by his complaint that it was cruel to make patients

who had been denied breakfast walk past the kitchen on the way to the X-ray department.

Unlikely though it may seem to anyone who has fed on our dietitian's decoctions, the breakfast smells proved sufficiently tantalizing to cause emptying of the patients' gall bladders between kitchen and fluoroscope.



Occupation? Typesetter.

Then I take it you are a drinking man?

Sure thing, Doctor. I figure it's working with ink that gets you. The ink gets in your system, and it takes alcohol to sort of neutralize it. Never did know anybody in the printing trade could stand it without liquor.

At last! The etiology of etaoin shrdlu . . .



At the bull session in the staff-room, the talk turns to the uncertainty of prognosis. Barrett tells of a former patient he ran into recently, who was sent home in 1925 to die of cancer of the liver. The wife promptly went to work in a beauty shop, and the husband sat on the front porch, sunning himself and waiting to die.

For seventeen years he has been sitting and waiting, taking just enough time out to beget three more children. The wife has been a good provider. Said the invalid to Dr. Barrett recently:

"I feel pretty good now, Doctor. Only trouble is, it's gettin' so feel like apologizing to everybody 'cause I ain't dead yet. Can't hardly look my neighbors in the face."



Lyle Raygen too recalls an instance when he was hasty in issuing a transfer to beyond. During the 1919 flu epidemic, when just past his internship, he walked into a foreign household to see the victim already laid out, surrounded by candles, arms crossed on chest, the family wailing their grief. Inasmuch as he'd arrived there too late to help the living, Raygen could do no less than go through the motions and pronounce the man dead. Lifting a eyelid perfunctorily, he flashed his light at the pupil—no reaction. With a gesture of sympathetic resignation he turned away, where the corpse sat up and said:

"That's my glass eye, Doctor. You want to see the other one?"



Dr. George Willis, the elder, bewails the reliance of the younger medical generation on the laboratory for diagnosis in cases where sufficient clinical acumen will yield results. Quoth he:

"Why, gentlemen, I distinctly recall the time when I was a mere interne. In 1898 it was, and no X-rays were there to make things easy for us. A woman with a huge abdominal mass came into the clinic. She was my first diagnosis."

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QUICK ENERGY LUS



Welch's Grape Juice exceeds all other fruit juices as a source of food energy, so vital under wartime conditions. A recent standard bicycle ergometer test proves conclusively that it increases the physical work output to a remarkable extent.

The calories in Welch's are properly balanced with essential vitamin B₁. A pint supplies 314 calories plus 50 U.S.P. units of Vitamin B₁. Hence the Welch energy lift is a wholesome alternative to use of carbonated beverages which are deficient in Vitamin B₁.

WEIGHT REDUCTION

A Glass of Welch's (three parts grape juice with one part water) before meals satisfies excessive appetite and thereby helps reduce weight by reducing caloric intake. The 17% dextrose content boosts energy as it satisfies hunger.

Ridiculously simple, yes. But amazingly effective! Scientifically controlled tests demonstrated an average weight reduction of 7 lb. per month in a group of intelligent cooperative subjects who followed directions implicitly.

SIST ON WELCH'S

Since its origin in 1869 Welch's Grape Juice has always maintained its position as standard. It is the only brand manufactured under complete laboratory control and subjected by adequate clinical investigation. Pasteurized and guaranteed pure. Supplied in quart, pint and four ounce bottles at groceries and soda fountains.

WELCH'S GRAPE JUICE

product of the

triumph. By careful palpation alone, I made out several teeth in the mass and correctly diagnosed dermoid cyst.

"Nowadays a man doesn't trust himself to diagnose pregnancy before the brat is out and going to school!"



A preliminary investigation previously reported in this department showed a considerable proportion of infantile conjunctivitis due not to Neisserian infection but to the dropping of ashes from mama's cigarettes during baby's nursing. Now comes a study on the excretion of nicotine in the breast-milk of mothers who smoke. While no appreciable damage appears to have been caused the

offspring, the burning question DOCTOR

Is it entirely fair to the new generation to establish their cigarette preferences before they've had the chance to hear the prices paid by the competing companies in the tobacco market, and so make their own choice?



This war has put 135,000,000 Americans on their mettle, and many on the home front do not consider one full-time job a sufficient contribution. A new high patriotism has been reached by Sylvia Jennings. On her record card appears the information that besides putting in an eight-hour day at a defense plant, she furthers the war effort as a chorister at night.

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Have You a Legal Problem?

If you are confronted with a legal question that lends itself to publication and would interest physicians generally, MEDICAL ECONOMICS will be glad to obtain the answer for you and publish it. Naturally, your name will not be used. Write your question in the blank below, tear out, and mail.

-----To MEDICAL ECONOMICS, Rutherford, N.J.-----

Here's my question:

ion DOCTOR—I'VE HAD A COMPLETE BREAKDOWN...
AND IT MADE ME FEEL SWELL!



AND LITTLE WONDER! For careful analytical breakdowns of Swan show that this new white floating soap meets the most exacting standards of purity and mildness. It's purer than the finest castiles!



You can safely recommend Swan for babies—for the most delicate skins—because Swan has no harmful alkalis, no free fatty acids, no coloring matter, no strong perfume. Your patients just can't buy a purer soap.

As for mildness, no soap tested, whether

er floating or castile, is milder than Swan.

But you'll find that Swan's virtues don't stop with purity and mildness. After all, Swan is the first really *new* white floating soap in over 50 years. It ought to be better than old-time floating soaps—and it is.

Swan suds faster than other floating soaps. Especially in hard water, you'll find it gives quicker, richer, longer-lasting suds. And—it's more real soap for the money than *any* leading toilet soap tested.



Try Swan. Try it for both home and professional use. We think that you, your family, and your patients, will find it the finest all-round soap you ever used.



SWAN
PURE, WHITE
FLOATING SOAP

MADE BY LEVER BROTHERS CO., CAMBRIDGE, MASS.

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flexible coating versus **TOUGH
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In the local treatment for deeper burns, and especially those about the hands, face and flexures, the several demonstrated advantages of Foille have been clinically noteworthy.

The coating produced by Foille is found to be

Soft and flexible
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(with saline solution)

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The results under Foille management:

Patients suffer less
Grafting permitted earlier
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Because of day-to-day performance in military, civilian and hospital practices, there is a steadily growing demand for

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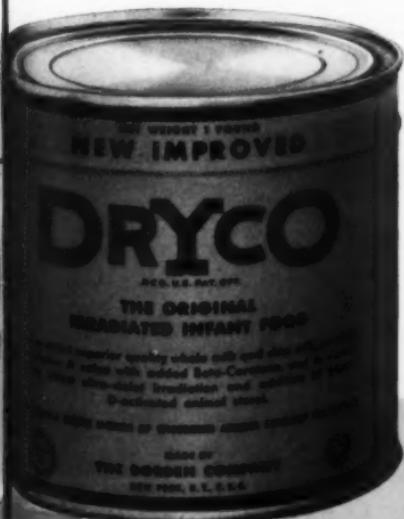
Special Announcement: NO SHORTAGE OF NEW IMPROVED DRYCO

THERE is no shortage of Dryco, nor is there likely to be a shortage this year.

You can prescribe this scientifically designed infant

formula food with the assurance that mothers will find New Improved Dryco immediately available at local drugstores.

As near to your patients as the nearest reliable drug store



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for wartime infant feeding



For the physician . . . DRYCO offers FORMULA FLEXIBILITY to meet individual feeding problems, and Dryco formulas are easy to prescribe.



For the infant . . . DRYCO FORMULAS supply high levels of milk proteins and minerals, low levels of fat, and ample potencies of vitamins B complex, and D to provide for optimal growth and health.



For the mother . . . DRYCO is readily available at drugstores without inconvenience or delay. Formula preparation is quick and easy, for New Improved Dryco is readily soluble in warm cold water.



For the war effort . . . DRYCO is a dehydrated low-fat milk food — hence it conserves urgently needed butterfat, metal for packaging, and shipping space.

Dryco Formulas:

Prescribe one levelled tablespoon New Improved Dryco per pound body weight daily, plus sufficient carbohydrate to meet caloric needs. (One tablespoon Dryco supplies 31½ calories.)

Prescribe New Improved Dryco Regularly



Complete Information on Request

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Bank Stocks as an Investment

A study of the probable effect of the war on bank earnings and dividends



It takes money as well as men and materials to wage global warfare. Commercial banks are the least glamorous of all industries in the front line of war work. Yet they make possible most of the planes and guns that flow to the four corners of the earth.

The Nation's banks as well as its automobile plants have been converted to the war program. What does this mean to the physician who holds bank stocks?

To begin with, it should be pointed out that banks are no longer the masters of their own earnings. As they are financing a substantial part of the government's war spending, their earnings are derived, more and more, from investments in Federal securities. In fact, the major source of bank income today is "interest income," while the volume of loans, especially of the smaller institutions, steadily declines.

Commercial banks stand, as one prominent banker puts it, between the upper milestone of low money rates and the nether milestone of high taxes. The insured banks of the country, according to the Federal Deposit Insurance

Corporation, earned \$2.24 on each \$100 of deposits in 1939, \$2 in 1940, and \$1.96 in 1941.

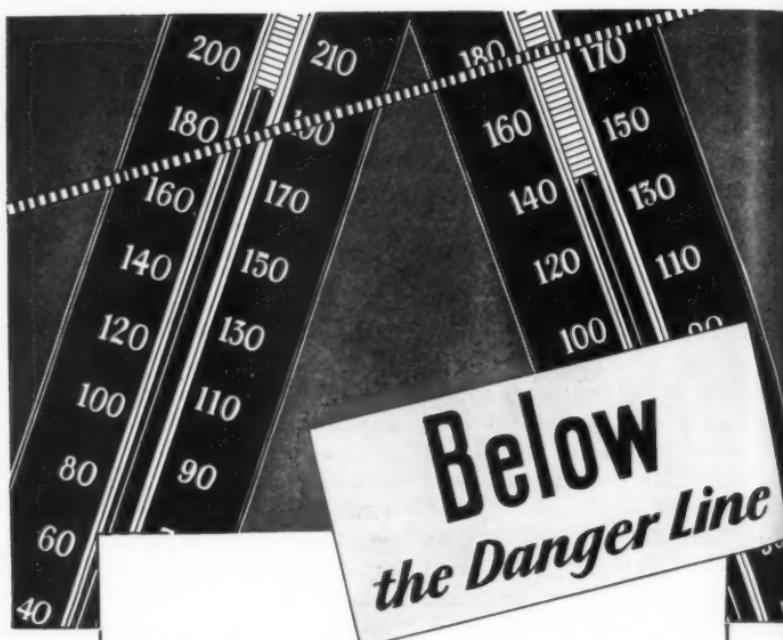
But even at present rates of interest and taxes, their increasing volume of government securities should yield enough income for most banks to improve their recent earning power and to show an increase in capital funds against steadily growing deposits.

BANK CHANGES

Marked changes have taken place in the banking system in the past two decades. For one thing, the number of banks has been reduced by more than half. From a peak of 30,560 in 1921, there were only 14,773 on June 30, 1942. This is only 250 more than the low point of recent years, which came just after the bank holiday of March 1933.

Then too, the character of bank assets has changed. A smaller proportion is in loans, a larger part in cash and government holdings. At the same time, mortgages and corporate security holdings have been reduced. The war, as might be supposed, has greatly accentuated this trend.

Loans of banks all over the



Your patients of middle age and over are doing more mental and physical work today than they did in their prime.

The result of this accelerated activity is an upward curve in the incidence of hypertension symptoms.

Safety* and reliability in the gradual reduction of excessive blood pressures are found in—

Tablets NITROBAR Comp.

Bismuth Subnitrate	5 gr.
Phenobarbital	1/8 gr.
Ext. Passiflora	1/2 gr.
Ext. Lupulus	1/2 gr.
Engestic Coated Red	

Suggested Dosage: One or two tablets three times a day.

How Supplied: Bottles of 100, 500 and 1000.

* Tablets NITROBAR Comp. are not contraindicated in cases of nephritis, renal insufficiency, or in the presence of acute inflammation.

McNeil Laboratories
Incorporated
Philadelphia - Pennsylvania

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country began to slump last year as one industry after another converted to war work or was forced to curtail production. Conversion was undertaken in most cases with government financial aid. Installment credit curbs and the shortage of ships, which has all but eliminated general foreign trade, deprived banks of other loan business. Merchant loans to finance inventories may drop sharply this year as the volume of store inventories is gradually reduced from peak 1942 levels.

The business loan outlook for the duration is obscure. There will certainly be no increase in consumer lending, and a number of avenues for business loans which are still open may be closed later. Whether the 1942 drop in business loans will continue hinges on the lending volume that develops under Regulation V of the Federal Reserve system.

"V" LOANS

Banks are not expected to make unsound loans. But some munition producers have wanted larger lines of credit than banking laws permit banks to grant. Hence the army, navy, and maritime commission now guarantee bank loans made to aid war production.

"V" loans have vanquished the bugaboo of losses for bankers through cancellation of war contracts. A substantial number of these loans have been made; the one to General Motors for a billion dollars is the most outstanding. Most "V" loans, however,

have been in the nature of a line of credit, and many companies have used only a small portion of the funds made available to them. Thus loans already negotiated appear larger on paper than they have proved to be in actuality.

But that is only one side of the banking picture in wartime. While business loans have been giving ground, the banks' share in the direct financing of the government becomes more and more pronounced. Bank holdings of government securities in 100 cities last year expanded by more than eleven billion dollars while loans to business declined by more than \$600,000,000.

This plunge into the business of producing war funds for the Treasury had startling effects upon many year-end bank statements. Resources, holdings of government securities, and deposits rose as much in the last three months of 1942 as years of normal growth would have made possible. And by next Summer the present figures may be doubled.

FINANCING THE WAR

Increases in holdings of government securities by the larger banks in 1942 ranged all the way from 20 per cent to 127 per cent. In the case of the Chase National Bank of New York—the nation's largest commercial bank—security holdings increased by \$962,900,000 to a total of \$2,327,000,000. The latter figure is larger than the whole public debt at the start of World War I. [Turn the page]

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Your REXALL Store simplifies your prescriptions of Isolated Pure Vitamins in their single state.

For those of your patients who require one or more specific vitamins in their single state, U. D. Company provides the following isolated pure substances in strengths and dosages convenient to prescribe:

THIAMINE HYDROCHLORIDE
(Vitamin B₁)

Available in liquid, tablet, and capsule forms in strengths up to 15 mgs. per capsule (5000 USP Units Vitamin B₁) and 30 mgs. (10,000 USP Units Vitamin B₁) per tablet.

RIBOFLAVIN — (Vitamin B₂)

Available up to 5 mgs. per tablet (5000 micrograms).

NIACIN (Nicotinic Acid) —

PP FACTOR Tablets up to 100 mgs.

NIACINAMIDE
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Tablet — 50 mgs.

ASCORBIC ACID — (Vitamin C)

Tablets up to 50 mgs. equalling 1000 USP Units Vitamin C.

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Available in concentrated liquid and capsule form (50,000 Units Vitamin D per capsule) for oral administration.

MIXED NATURAL TOCOPHEROLS —

VITAMIN E Available in capsule containing 50 mg. alpha-tocopherol.

MENADIONE
(2-Methyl-1, 4-Naphthoquinone)

VITAMIN K activity. Available in 1 mg. tablets.

PANTOFAC (Calcium Pantothenate)

"ANTI-GRAY HAIR FACTOR" (Part of Vitamin B Complex) available in 10 mg. tablets.

PYRIDOXINE HYDROCHLORIDE
(Vitamin B₆)

1 mg.

ALPHACAPS 25,000 UNITS PER

CAPSULE — (Vitamin A)

Your neighborhood Rexall Store is convenient, too, as well as economical. Its prescription department, in charge of a graduate pharmacist, is your assurance that your prescriptions will be filled exactly as you write them with U. D. or other high-grade standard pharmaceuticals. We suggest that you tell your patients to take advantage of all Rexall facilities.

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Even more will be expected of banks this year. Present estimates are that the Treasury will have about \$80 billion of securities to sell in the fiscal year beginning July 1. The banks' share may run to \$50 billion, or about twice the amount they are being called upon to acquire in the fiscal year ending June 30.

The immensity of its financing operations may cause the Treasury to devise a formula for determining a bank's capacity to buy new Treasury issues. Voluntary use of such a formula would help to spread the financing more evenly over the country and to lighten the load which the big New York City and Chicago banks have been bearing.

For years the Treasury has relied heavily upon New York banks to purchase a large proportion of the government issues that must be absorbed by commercial banks. In peacetime idle funds from all over the country flowed to New York. This situation no longer exists because New York is not, relatively speaking, an important war production center.

This means that more funds are going to interior banks in defense areas—a fact that prospective investors should consider in weighing the merits of local bank shares versus New York City bank stocks. New York banks may not be able to hold their government securities as well as some of the others.

BANK TAXES

Bank earnings in 1942 were

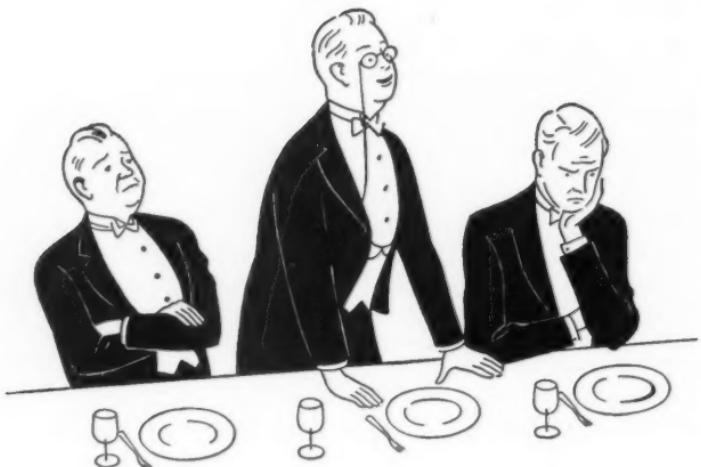
higher on the average than for a number of years, despite higher taxes. One representative metropolitan bank, for example, had its taxes increased from \$400,000 in 1941 to \$1,100,000 in 1942 and still made more money.

Unlike industrial companies, banks are not much concerned with normal and excess profits tax rates because their expenses usually exceed taxable income. This condition prevails, of course, because a large proportion of bank income is obtained from securities whose interest is exempt from such taxes. However, taxes are becoming heavier; banks are now subject to the federal corporation surtax even on income from government securities.

Federal bonds issued since March 1, 1941 are no longer tax exempt. As holdings of older issues are gradually reduced and replaced with taxable issues, the change will lead in time to normal income taxes for the banks. It should be noted, too, that the Treasury favors elimination of municipal bonds from the tax-exempt list, although no action has been taken along this line by Congress.

DIVIDEND OUTLOOK

Despite favorable prospects for increased bank earnings, it appears unlikely that the majority of banks, especially the large ones, will raise dividend payments above present levels. A recent decision of the Continental Illinois National Bank and Trust Com-



Postprandial distress

Having to listen to a prosy after-dinner oration may be a painful experience, but more real, in the physical sense, is the distress that awaits him who has dined well but none too wisely.

Gourmandism is difficult to cure, as is the habit of hurried dining, and so it becomes a matter of alleviating the gastric distress caused by hyperacidity.

Physicians for many years have found in Cal-Bis-Ma the kind of preparation that will help provide this relief. A palatable powder composed of substances recognized as effective for gastric neutralization, Cal-Bis-Ma may be prescribed with assurance that it will act promptly and safely.

A trial supply will be gladly sent to physicians. Please write to the Dept. of Professional Service.

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pany of Chicago may be cited as an example of how bank officials view the dividend question. Continental directors considered a higher dividend rate but decided to continue the past payments, which required less than one-half the 1942 earnings, and to retain the balance as an addition to surplus.

Explaining this decision, the president said: "Deposits are very high and we wish ample capital to support them. We do not want to be in the position of asking stockholders to contribute additional capital. While no definite statement can be made as to future dividend action, it appears there is little likelihood of an early increase."

Thus, earnings of most banks are climbing, but dividends are not being upped to any extent. That being the case, the investing physician who contemplates buying bank stocks might well center his purchases on stocks with high yields. For example, the stocks of Chase National and National City Bank of New York sell on the market at about the same price. Chase pays \$1.40 a share annually in dividends while National City disburses \$1 a year. There appears to be little prospect of an early dividend change in either case.

BANK RATIONING

Commercial banks are the bookkeepers of the American war effort. Their newest activity in this regard is the bank ration pro-

gram for civilian goods. Ration coupons for the account of retailers and wholesalers are handled in much the same fashion as checks for money. Compensation from the government for this service is intended to cover only the actual bank expenses involved in handling it.

This ration plan makes more acute than ever the question of bank manpower. Small banks are having a hard time keeping their personnel. The draft has hit them hard and war industries have taken bank personnel away by the hundreds.

The war is making itself felt on branch and chain banking, too. Our banks may soon have to follow the British and Canadian precedent of closing many branch offices. Further increases in charges for bank services may also be necessary in order to reduce the present volume of checks that banks process. This, however, is a problem for each individual bank.

A bank stockholder may well ask: In what position should my institution be when the war is over?

Answer: Its position will be favorable if the bank's earning assets consist of sound loans, government securities well distributed as to maturities, and other high grade obligations to which there is little or no credit risk attached. The smaller bank may also have a selected list of properly amortized mortgages.

—RAYMOND L. HOADLEY



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on the job—**

less troubled by

**ECZEMA
PSORIASIS**

and other skin disorders

The burden of the patient with eczema, psoriasis or other skin disorders is not an easy one to bear. His mind is apt to be as much troubled by his discomfort as on his daily work.

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Perhaps you already know from clinical reports how Mazon is quick and effective and brings relief to the irritated areas—how the simple treatment with Mazon helps to clear up the affected areas.

Mazon is anti-pruritic, anti-septic, anti-parasitic. It is easy to apply and requires no bandaging.

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What They're Reading

CASTOR OIL AND QUININE
By George Wonson Vandegrift, M.D. 252 pp. E. P. Dutton. \$3. Review by Meyer Berger, New York Times.

This is a shadowy portrait of a Paul Bunyan of medicine who worked on and among New York City's lower East Side immigrants through the Eighties, the Nineties, and through the early decades of the twentieth century.

Son of the subject, the author writes with awe of his extraordinary father. You get the feeling somehow that the career, achievements, psychic power, and sheer animal strength of his parent have overwhelmed the writer as they must have overwhelmed his father's patients, friends, and contemporaries generally.

Writing in the shadow of his father's dimensions, Dr. Vandegrift forgets to mark down when his father was born or when he died, which might be counted weaknesses in any biography. He never even tells his father's name — opens with a reference to "my father" and uses either that form or some pronoun throughout. A single line in the doctor's biography gives the only hint to his birthplace, apparently an uniden-

tified town near Newburgh, N.Y.

Throughout the narrative the writer shows a stubborn aversion for the specific. In his breathless anxiety to unload fresh but vague generalities about his sire's genius and eccentricities he ignores dates. The reader seldom knows when the story moves from the Eighties into the Nineties or when it has carried into the new century.

When Dr. Vandegrift, the father, came to Corlears Hook in July 1879, he had, his son confides, only a slight knowledge of anatomy, less physiology, two years of preparatory study at the old Free Academy, two years of medicine at New York University, and a supply of ipecac. He hung his shingle at Henry and Gouverneur Streets, a quarter teeming with impoverished German and Italian families; and at 50 cents a head handled from 125 to 150 cases each day in his office. Because of his location he was called The Corner Doctor.

He charged \$1 for neighborhood calls and got from \$5 to \$10 for delivering babies. He paid the butcher, baker, grocer and cobbler with gruff but efficient professional services and took in enough cash to support a flashy

90%* OF THE POPULATION HAS IT

*According to findings of the United States Health Service

FOOT TROUBLE

As a result of the wholesale absorption of men and women by industry into war production, cases of painful, fatiguing and disabling foot trouble—and their consequent slowing of production—are becoming a serious problem. The growing shortage of Physicians left behind to administer the needs of the civilian population, makes the handling of foot cases, requiring mechanical correction, all the more difficult.

In this emergency, Shoe, Department Stores and Surgical Supply Stores featuring Dr. Scholl's Foot

Comfort Service, and all Dr. Scholl's Foot Comfort Shops in principal cities, are at your disposal to carry out your instructions and give you every possible assistance in relieving you of troublesome, time-consuming cases of footailments. Please mail coupon for desired information.

DR. SCHOLL'S ARCH SUPPORTS and exercise relieve tired, aching feet; rheumatoid foot and leg pains and excessive fatigue from standing or walking, due to foot arch weakness. Extremely light in weight and resilient. Adjustable as condition of feet improves.



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buggy and a white horse and to indulge his astonishing appetite for pretty women whom he introduced in bevvies into his own home as "aunts."

Dr. Vandegrift Sr. had been a hardware clerk before he studied medicine. He carried some of the tools of his old trade into the new. He performed tracheotomies on babies, for example, with a pocket-knife dipped in iodine or carbolic acid, and used hairpins in place of tubes to keep open the artificial breathing vent. Syphilitics were dosed with horse-sized rough mercury pills. The corner barber came in to help with the blood-letting.

The amazing doctor overcame immigrants' distaste for fresh air by kicking out their bedroom windows, sashes and all. For a wide range of ailments he merely prescribed his favorite "gunshot mixture," a vile compound of some thirty ingredients, all unpleasant. He held the theory that his clients were suspicious of sissy drugs.

To treat lumbago the good doctor calmly heated a glass rod over a bunsen burner and ran it across the lumbar region and up and down the spine. He used the same treatment for neuritis and neuralgia. The filial Boswell would have the reader believe this remedy not only worked but was "popular." However that may be, the lusty doctor did endear himself with patients for whom he prescribed straight whisky—sometimes champagne—as heart stimulants, mostly in pneumonia cases.

Sometimes, the biographer relates, the old doctor's patients were apt to fall behind in payments, especially in maternity cases, which were almost as numerous as common colds. One hairy-chested neighbor who owed for four babies showed up at the office one day with some minor ailment. Dr. Vandegrift chloroformed him, found \$35 in his pockets and with characteristic violence extracted \$33—wholesale rate, apparently, for the four babies in arrears.

Whatever he fancied in a patient's home this lusty medico confiscated. He'd stick their books in the pockets of his linen duster, take food from their pantries, use their pomade on his hair and on his mustache, rub their snuff on his gums, chew stale cigar ends or cigarette stubs. He was pugilistic, too, forever belting his understudies around.

Vandegrift the elder, the biographer frankly writes, was not always as orthodox or earthy in his diagnoses as he was in his primitive treatments. He believed in spiritualism and consulted the dead for guidance in locating the pains and aches of the living.

Without fixing the dynasty, the author tells of Ypsilon, lady-in-waiting to "an Egyptian queen who lived long before Cleopatra," and how from the remote beyond she diagnosed liver, bowel, and other organic huckapuckacha of The Corner Doctor's patients with incredible accuracy. Ypsilon's com-

[Continued on page 110]

Arthritic . . . "patients also should receive regular doses of salicylates. If their pain can be diminished, they will be much more likely to tolerate their exercises."

*The Physiotherapy Review,
22:296-300, (Nov.-Dec.) 1942.*



Regardless of the "specific" measures employed in the management of the arthritic syndrome, salicylates constitute a most valuable adjunctive weapon for the relief of the pain symptom.

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How the British are Handling Medical Personnel Problems

Civilian demands have been cut so more M.D.'s can join services



Medical manpower in Great Britain is controlled by the central medical war committee of the British Medical Association, which works closely with the Ministry of Health. As early as October 1937, this group (then known as the central emergency committee) began to prepare a register of all doctors in Britain. Doctors were sent questionnaires asking for particulars about themselves and their work, and whether they were willing to serve in the event of an emergency at home or abroad. Though physicians were not compelled to answer, the response was excellent, even among those who did not belong to the BMA.

When war broke out, the committee was given the task of allocating doctors to the army, navy, and air force. Local branches undertook the actual detailed work; one of their tasks is to see that civilian medical requirements do not suffer through the assignment of doctors to active war duty.

When a British doctor becomes liable for military service, the committee studies his case, and may recommend his deferment. The

committee is apparently under the direct jurisdiction of the Ministry of Health, and its recommendations seem to be accepted without question by the Ministry of Labor and National Service, which is ultimately responsible for the calling up of all persons for service. If a doctor leaves the job for which deferment was granted, he becomes liable automatically for military service unless his new employers or the appropriate local medical war committee can provide adequate reason for further deferment.

In 1941 the Minister of Health set up a medical personnel committee to advise on the allocation of doctors to the armed services, and to help determine which physicians should be left in civilian posts. In its first report, this group recommended that in each of eleven defense regions a committee be set up to see that civilian needs were met, to eliminate the possibility of under-employment, and to avoid over-lapping of medical services. These regional committees were created, and already have achieved some important

economies. Other ideas which have been adopted include the raising of the military age limit of doctors from 40 to 45, and the adoption of compulsory powers to permit the transfer of staffs from one hospital to another in emergencies.

In a second report, the medical personnel committee was able to show that considerable reductions in civilian demand for medical care had been brought about. However, special measures have been adopted to meet the irreducible needs of the armed forces. Hospital staffs have been cut, and geared to greater mobility. About 100 doctors serving in mental institutions have been recruited for military service. Newly-graduated doctors are permitted to hold hospital appointments for only six months before they are taken into the services. Public health staffs have been reduced. Women physicians are now liable for military service. Medical schools have been asked to reduce clinical courses by six months and to discontinue post-

graduate courses which require full-time attendance of medical men and women for extended periods.

The Minister of Health, in a recent report, revealed that of the pre-war total of nearly 19,000 general practitioners in England and Wales alone, more than 4,500 had gone into the armed services by September 1942. (His report did not deal with specialists, public health men, etc.) Before the war according to the Minister, there was an average of one general practitioner to every 2,200 persons in England and Wales; there is now one to every 2,700.

After the medical personnel committee objected to the heavy drain on the supply of civilian doctors, the armed services agreed to cut future demands for more physicians as follows: air force 37 per cent; army, 40 per cent; and navy, 50 per cent. Since the war started, England has accepted for civilian practice more than 800 alien doctors.

—ROBERT Y. HOLLOWAY

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therefore exerts an over-all therapeutic influence which goes far beyond that produced by the administration of only one group of nutrients. It proves highly effective, especially when the deficiency state involves proteins and minerals as well as vitamins. Ovaltine is palatable and easily digested, a factor of importance in malnourished patients with capricious appetites and easily deranged digestive mechanisms. Physicians are invited to send for samples. The Wander Company, 360 N. Michigan Avenue, Chicago, Illinois.

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*Each serving made with 8 oz. milk; based on average reported values for milk.

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Each fluid ounce (2 tablespoonsfuls) contains	Alcohol, 13% by volume	Bottle of Suppository Medicine Daily
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Niacin Amide, 18.5 mg. (18,500 Micrograms)	200%	**
Pantothenic Acid, 2 mg. (2000 Micrograms)	200%	**
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All other factors of the vitamin B Complex inherent in Liver, Yeast, and Eggs which maximum daily requirements have not been established. Requirements not established.

* Need in human nutrition.

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High Potency ELIXIR B-COMPLEX Containing the better known, lesser known, and unidentified factors of the VITAMIN B-COMPLEX at a saving to your patients

Physicians have found that most vitamin B deficiencies are multiple and require the *COMPLETE* B-Complex for fully effective treatment.

Elixir Bepadin combines the *NATURAL* B-Complex factors found in Liver Concentrate, Yeast Concentrate and Rice Bran Extract together with added synthetic vitamin materials in Sherry Wine. The exceptionally pleasant flavor of the Sherry Wine Base overcomes objections to taste which are often associated with preparations containing yeast or liver.

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Elixir Bepadin is available at all better drug stores in 16-oz. Bottles.

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Niacin Amide 18.5 Milligrams
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Uncle Sam says,
"Enrich it"

RECENTLY the U. S. Department of Agriculture announced a new series of regulations — regulations affecting the baking of white bread.

Physicians, we believe, will be particularly interested in two of the requirements.

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Second, all white bread will contain not less than 3 parts, nor more than 4 parts of milk solids to 100 parts of flour.

Many bakers have been supplying such bread. But now all white bread will have these extra nutritive elements.

It will provide thiamin, niacin

and iron — and also additional protein and calcium from the milk solids.

Bread is plentiful, delicious and easily digested. It has been the foundation food through the ages. Now, more than ever, it deserves its place as the basic food in the diet of fighting America.



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Science Letter

To help medical officers keep informed about scientific developments while they are in military service, a biweekly letter is being distributed cooperatively by the American Medical Association, the National Research Council, the army and navy medical departments, and the U.S. Public Health Service. Comprised of four to six pages of important abstracts from current scientific literature, the letter goes by air mail or V-mail to all camps and hospitals. There is mimeographed for distribution to medical officers.

Afarewell, Pop

The grave of Major Lemuel Edward Day of Chicago lies deep in the Papuan jungle, in soil won by the fighting American boys who called him "Pop." There he died of "heart failure" after weeks of day-and-night toil in his grass-roofed, bomb-scarred field hospital. With the wounded streaming back from the lines, there was little time to bury him. There was no bag to cover him, no bugler to sound taps. But his staff knew what "Pop" would have liked; they cranked the battered phonograph he had so often used in his

efforts to cheer them up, and played his favorite record, "Beautiful Isle." A laconic dispatch coined his epitaph: "Most beloved surgeon of the American forces battling in the mud of New Guinea."

Army Training Filmed

A film describing the army's method of training medical officers is in preparation under the direction of the Office of War Information. Based on the work of the Medical Field Service School at Carlisle Barracks, Carlisle, Pa., it will show civilian audiences how medical men are trained to serve in the armed forces. Herman Shumlin, producer of such stage successes as "The Little Foxes," and Albert and Frances Hackett, who wrote "The Thin Man" film series, are in charge of the project.

Wanted: More Nurses

A Red Cross campaign is under way, with President Roosevelt's endorsement, to enroll in the current quarter 36,000 graduate nurses for the army and navy nurse corps, 100,000 nurses' aides to help in civilian and government hospitals, and 1,000,000 students for

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Luxury

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home nursing classes. The National Broadcasting Company is cooperating in the appeal.

The seriousness of the nurse shortage is illustrated by a statement by Paul McNutt, director of Defense Health and Welfare Services, that the new enrollment of 65,000 young women in nursing schools during the twelve months beginning June 30 would meet the bare minimum of civilian and military requirements. Major Julia C. Stimson of the army nurse corps has warned that classifications hitherto "essential"—superintendents, supervisors, head nurses, and instructors—must soon contribute personnel to fill expanding military needs.

Boston hospitals are drafting university students as part-time workers. Undergraduates register with the University Student Defense Board, indicating the hours they are available, and the Red Cross assigns them to duty in institutions that need them.

"Luxury" Cases Face Ban

Elimination of "luxury" medical attention will be forced by the exigencies of wartime and the post-war period, it is predicted by medical division of the Office of Dr. George Baehr, chief of the medical division of the Office of Civilian Defense. As examples of luxuries he cites going to a hospital for a rest or for clinical diagnoses that could be made in doctors' offices, and calling the doctor to the home when the patient

could safely be taken to the physician or could be treated by someone at home under telephoned instructions.

Army Pharmacy "Archaic"

The United States Army's pharmaceutical service is dangerously archaic and should be put in step with pharmacy's advanced civilian status through the organization of an up-to-date pharmacal corps. That criticism and recommendation have been made by John W. Dargavel, secretary of the National Association of Retail Druggists, in a plea for official recognition of pharmacy's role in the war effort.

"We send the army our best doctors," Dargavel said, "but we run the dangerous risk of nullifying a lot of their work by entrusting the important compounding and dispensing of medicines to incompetents who have had no pharmaceutical training prior to their induction."

He charged that, although the men in the armed forces also receive the best in food, clothing, equipment, and dental care, the army's pharmaceutical service is on a par with that of 1898. In civil life, completion of a four-year college course in pharmacy is required to qualify a pharmacist, but the army is turning out its druggists after a ninety-day course, he pointed out.

"We are still sending four-year graduates from colleges of pharmacy, with years of practical experience, into the army and giv-



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them non-professional assignments, or, if they are permitted to practice pharmacy, they receive a private's rating and are placed under an army pharmacist who is in his sergeant's stripes in a day school," Dargavel declared.

It is time that we discard the archaic methods of handling pharmaceutical work in our services and replace it with a pharmacal corps manned, officered, and equipped to handle drugs and medicines properly and intelligently."

Satz Sponge Rubber

A needed substitute for sponge rubber has been developed by E. R. Squier & Black following investigations with linoleic acid and other vegetable oil derivatives. The product may be used in the manufacture of operating room tables, orthopedic pads, and hospital bed mattresses. It is also expected to be of value in the protection of equipment for the armed forces. Both the product and the process have been made available for the duration to the Rubber Reserve Section of the War Production Board.

Drop that Knife!"

A patient on an operating table can't be expected to restrain a surgeon from correcting a condition that isn't covered by an insurance policy. So ruled Judge Michael A. Gusmano of Pittsburgh recently ordering that benefits be paid

a patient. To invalidate the patient's claim, the judge said he would have to be convinced that the patient had thrown off the effects of the anesthetic, grabbed the surgeon by the arm, and shouted: "Drop your knife! That part of my body is excluded from my insurance policy."

Drug Shortages

Shortages of sulfadiazine and sulfathiazole exist despite the fact that output of sulfa drugs in general has been substantially increased, says Fred J. Stock, chief of the drug and cosmetics section of the chemicals branch of the War Production Board. Stepped-up production is reducing both shortages, he reports, but the sulfadiazine supply is expected to remain limited for several months.

Stock asserts that the output of atrabrine will be adequate for all needs, but that quinine is getting even scarcer. There is plenty of Vitamin A, he reveals, but little Vitamin C. A shortage of the latter is probable for the duration.

TVA Seeks Doctors

The Tennessee Valley Authority has launched an intensive campaign to recruit physicians for duty as medical officers. Posts are open to men ineligible for army service who will accept assignments on construction projects and in hydroelectric power and war chemicals manufacturing plants. Work includes industrial hygiene; treatment of injuries; physical ex-

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minations; general public health in construction camps and villages; and medical care of families in isolated construction zones. Salaries are \$3,200 to \$4,200 a year, with promotion opportunities. Further details may be had from Dr. E. L. Bishop, Director of Health, Tennessee Valley Authority, Chattanooga, Tenn.

Housing-Unit Clinics

The Columbus, Ga., housing authority opened clinics in each of its six housing developments when the town lost half its physicians to the armed forces. The clinics, operated jointly by the county and city health departments, are now open to residents of the city at large.

Birth Control an Issue

Connecticut's ban on the prescription of contraceptives will soon be tested in the United States Supreme Court as a result of a challenge laid down by Dr. Wilder Tileston, clinical professor of medicine at Yale, with the backing of 541 Connecticut physicians and some 700 other medical men throughout the country.

Dr. Tileston went to the Connecticut Supreme Court of Appeals with three specific cases and asked a ruling as to whether he could legally prescribe contraceptives. The court, upholding the statute, decided that even if a physician believes pregnancy would endanger a patient's life or health, the law's ban is absolute.

The Connecticut group of doctors supported Dr. Tileston's petition with the contention that the law places them in the dilemma of either failing to discharge their professional duty or flouting a criminal statute. Doctors throughout the Nation filed briefs endorsing the request for a United States Supreme Court review. Though the high court has raised the issue that the action is irregular, because women patients whose lives allegedly are endangered should be the litigants, the case is expected to be pressed to a definitive decision.

Radio Advisers Named

To advise on the medical aspects of health programs and to recommend means of improving radio's medical offerings, the National Broadcasting Company has appointed three physicians as permanent consultants. They are: Dr. Morris Fishbein; Dr. Henry R. Viets, Boston neurologist; and Dr. Winfred Overholser, professor of psychiatry at George Washington University.

Older M.D.'s on Toes

Older physicians remaining in civilian practice are manifesting increased interest in medical advances, according to the Medical Society of the State of New York, which has analyzed attendance at 1941 and 1942 district branch meetings. According to the society's journal, the 1941 attendance of physicians between 45 and 54

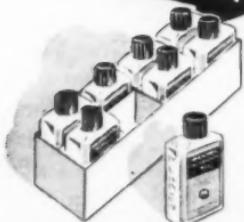
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years of age comprised 25.21 per cent of the total, as compared to 30.81 per cent last year. Attendance of those in the 55-60 age group was 16.16 per cent in 1941; 22.56 per cent in 1942. In the 65-74 age group attendance was 9.79 per cent in 1941; 15.66 per cent in 1942. And in the 75-84 age group attendance was 1.56 per cent in 1941; 2.53 per cent in 1942.

Vitamin C Restricted

Vitamin C, widely used by the armed forces in "K" and "jungle" rations, has been placed under strict control by the War Production Board. However, the WPB has promised that patients holding doctors' prescriptions will be able to obtain the quantities they need.

M.D. Drug Addicts

Drug addiction is a serious occupational hazard among physicians concludes M. J. Pescor, clinical director of the U.S. Public Health Service Hospital in Lexington, Ky., from a study of addicts admitted to that institution. He offers the following comparisons between the physician addict and the lay addict:

1. The average physician addict undergoes treatment voluntarily.
2. He first used drugs to relieve distress or pain—not because of association or curiosity.
3. He tends toward morphine only—not a multitude of drugs.
4. He has attempted voluntary

cure three times, whereas the ordinary addict has done nothing to help himself.

Society Backs Insurance

Promotion of voluntary medical-expense insurance to meet a growing public need is an objective of the Medical Society of the County of New York, Dr. J. Stanley Kenney, president of the society, has announced. Asserting that "the society means to insist upon a more efficient organization of medical service for all groups of people," Dr. Kenney added:

"It becomes increasingly evident that our present form of the practice of medicine is being attacked from all sides. All this focuses our attention seriously on the need for voluntary medical-expense insurance. Never before has its success been of so great importance to both the general public and the medical profession."

Approved Hospitals

A roster of 2,989 approved hospitals, the great majority of them in the United States and Canada, has been issued by the American College of Surgeons as a result of its 1942 survey. The total is 116 higher than in 1941. Dr. Malcolm T. MacEachern, associate director of the college, pointed to the striking growth of the roster since 1918, when a mere eighty-nine hospitals won approval. The college regents warned of a grow-

The agreeable
Fluid Hypnotic

Neuronidia

(Mild Sedative—Schieffelin)

The sleep induced by Neuronidia closely resembles the normal—calm, refreshing and free from distressing sequelae upon awakening.

As a palatable sedative, Neuronidia is effective in small doses and readily eliminated; thus there is no drowsiness or languor to interfere with the daily activities.

Literature and sample upon request.



Schieffelin & Co.
20 Cooper Square New York, N.Y.
Pharmaceutical and Research Laboratories

TEN-O-SIX
will give your patients
prompt relief in
PRURITUS ANI
PRURITUS VULVAE

Also efficacious in relieving the itching caused by eczema, acne, dermatoses, athlete's foot, etc. May we send you a bottle for clinical test work?



BONNE BELL
17609 Detroit Ave.,
Cleveland, Ohio

Please send me bottle of TEN-O-SIX Lotion for clinical test work.

Dr.

Address

City & State.....

ing danger of reduced standard as a consequence of huge population shifts. These shifts, it said, tend to impose greater burden on the hospitals of some communities than their depleted staff can handle properly.

Microfilm Aids Science

American and British physicians are using microfilm for the transatlantic exchange of scientific data and documents, Professor A. V. Hill, secretary of the Royal Society, disclosed recently in London.

Army Rank Limited

Physicians under the age of 38 entering the army, now are appointed only as first lieutenants and those from 38 to 45 are commissioned in grades for which there are vacancies, the surgeon general has announced. Changes in the standards for initial-grade appointments are attributed to altered military and civilian requirements. To meet an acute need applications are solicited from physicians under 38 whom the Procurement and Assignment Service has designated as available.

Chiropodist's Appeal

An appeal, representing "the biggest news for chiropody in years," has been made by the National Association of Chiropodists. Dramatized in a full-page advertisement in Life magazine, the plea proposes the assigning of specialists in the army exclusively to the care of feet. Enlarged reprint

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Give the cigarette
they prefer to get*



IT'S EASY to understand why cigarettes are the preferred gift in the armed services. But did you know that among them the best-liked brand* of cigarette is Camel? Camel is the popular choice of millions and millions of smokers for its finer flavor and superior mildness.

Send Camels, the service man's favorite, to those friends or relatives who are fight-

ing our battles—fighting them efficiently and unselfishly. Your thoughtfulness will be appreciated.

Tobacco stores feature Camels by the carton. See or telephone your dealer today.

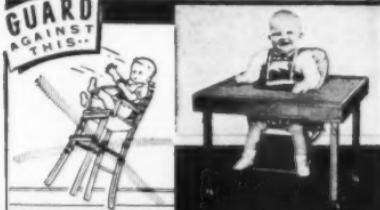
Remember, you can still send Camels to Army personnel in the U. S., and to men in the Navy, Marines, or Coast Guard wherever they are. The Post Office rule against mailing packages applies only to those sent to the overseas Army.

*With men in the Army, the Navy, the Marine Corps, and the Coast Guard, the favorite cigarette is Camel. (Based on actual sales records in Post Exchanges and Canteens.)

Camel
costlier tobaccos



•Keep Baby Safe!



Pat. No. 2,161,028
Here's PROTECTION with
BABEE-TENDA Safety Chair

All parents want "SAFETY FIRST" for their babies. That's why they buy the **BABEE-TENDA** Safety Chair—it is low and can't topple over like a high chair and cause serious or fatal accidents. A Safety Halter Strap prevents baby from falling or climbing out. Used indoors and outdoors, folds compactly for traveling. Highly endorsed by the Medical Profession. Endorsements sent upon request. Sold ONLY direct to consumer.

NOT SOLD IN STORES.

Write for Circulars and Prices
THE FORT MASSAC CHAIR CO.
503 Finance Bldg., Cleveland, Ohio

Test Newest Collection Stimulators . . . FREE

Investigate the newest economical and practical collection procedure. COLLECT your accounts promptly. REDUCE delinquency. PRESERVE the good will of your patients. CONVERT old lagging accounts into cash. NO COMMISSION CHARGES.

Send for circular explaining FREE test trial offer.

ASSOCIATED CREDIT BUREAUS
National Exchange Bank Bldg.
Steubenville, Ohio

Please send me your circular explaining FREE test trial offer of COLLECTION STIMULATORS.

Name M.D.

Address

City State

of the advertisement have been sent to members of Congress and other government and military authorities.

Bills are pending in Congress to place chiropodists in the army in their professional capacity. But despite the shortage of Army physicians, the association contends, action is being held up on the creation of a chiropody corps.

British Attack VD

Compulsory treatment for persons suspected of spreading venereal disease has been ordered in Great Britain, following a recent disclosure by the Ministry of Health that venereal cases have increased 70 per cent since the war began. The new regulation requires suspected persons to undergo clinic treatment. Formerly, attendance at clinics was voluntary. Penalties for refusal to comply are three months' imprisonment, £100 fine or both.

Used X-Ray Film Sought

Bundles for America is collecting used and discarded X-ray film through a recently organized salvage X-ray division. Sale of the film will provide funds to help finance aid to servicemen and their families.

Brinkley Enterprises

Dr. John R. Brinkley is dead, but his "gland operation" enterprises apparently survive. Six former associates of the "specialist," almost at the moment they were pleading guilty to mail fraud

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IRON ...
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Recommend

BRER RABBIT MILK SHAKE

It's Rich in Both!

In Brer Rabbit Milk Shake children not only get a substantial supply of iron, but they may also enjoy the healthful benefits to be derived from the proteins, calcium and vitamins contained in milk.

Brer Rabbit Milk Shake* is a fine suggestion for those who do not normally like milk, and those who do not drink enough milk. As the chart below shows, Brer Rabbit New Orleans Molasses is second only to liver as a food source of available iron.

There is 1 full mg. of available iron in every tablespoonful of Green Label Brer Rabbit New Orleans Molasses

Three tablespoons of Green Label Brer Rabbit Molasses, added daily to the diet, supply 3 mg. of available iron. Or the amount may be increased at the direction of the physician. Penick & Ford, Ltd., Inc., New Orleans, La.

*Made by adding 1 tablespoonful of Brer Rabbit Molasses to a glass of milk.

Brer Rabbit New Orleans Molasses is second only to liver as a food source of available iron

TABLE!

	Total iron mg./100 gm.	Per cent availability	Available iron mg./100 gm.
MOLASSES "A"	.3.2	.97	.3.1
MOLASSES "B"	.6.0	.85	.5.1
BEEF LIVER	—	5.7	—
OATMEAL	—	4.6	—
APRICOTS (dry)	.2.8	.70	.5.7
Eggs	.4.1	.96	.4.0
WHEAT	—	4.0	—
RAISINS (Muscat)	3.1	.98	3.1
PARSLEY	5.0	.47	—
BEEF MUSCLE	3.2	.62	1.9
OYSTERS	3.0	.50	1.5
CABBAGE	.5.8	.59	1.6
MUTTON	—	1.5	—
LETTUCE	.8.	.22	.1.3
SPINACH	5.1	.72	3.3
	1.5	.24	1.2
	.26	.63	.6.9
	20.	.6.5	—

*Brer Rabbit Molasses—Gold Label (light, mild flavored)
**Brer Rabbit Molasses—Green Label (dark, full flavored)
1. Am. J. Dig. Dis. Vol. VI No. 7 (Sept.) pg. 459-62, 1939



charges in Little Rock, Ark., recently, indicated that they had no intention of abandoning their practices.

The Federal judge who accepted their pleas, after a postal inspector's expose of the conduct of Brinkley hospitals in Arkansas, placed the six on probation with a warning that they must cease "taking advantage of people who are sick and weak and cannot fend for themselves." Thereupon a member of the Brinkley medical staff inquired if "this means our hospital at Del Rio, too."

Dr. Brinkley's former associates had established a hospital on several floors of a hotel in Del Rio, Texas, according to postal inspectors. Before the "gland specialist"

died, his colleagues bought his "recheck list" of former patients many of whom were said to have returned to the hospital for follow-up consultation, and frequently for additional operations.

M.D. Deaths in 1942

Of 3,353 U.S. physicians who died in 1942, eleven died in action on battlefronts and thirty-seven died while in military service. According to the American Medical Directory Report Service, the average age at death was 65, compared with 65.9 in 1941. Nine died between the ages of 95 and 100. Forty-seven suicides were recorded, eighteen of them from bullet wounds. Heart disease again accounted for the major number

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Each 5 minim Ferinex capsule contains ferrous carbonate, 3 gr. (in the form of a special mass), vitamin B₁, 111 I.U., vitamin G (B₂), 100 gammas.

MORE THAN IRON ALONE

Prompt correction of hypochromic (secondary) anemia is achieved with Ferinex. In addition to generous amounts of highly available iron, Ferinex supplies vitamins B₁ and G (B₂). Ferinex with liver concentrate contains in addition 3 gr. of highly refined liver extract. Rapidly effective whether anemia is due to blood loss, infections, or iron starvation. Does not produce gastrointestinal upsets.

THE PAUL PLESSNER COMPANY, DETROIT, MICH.

FERINEX

THE ANTIANEMIC FREE FROM GASTRIC REACTIONS

Tonsillitis? Pharyngitis? Laryngitis?

R

NUMOTIZINE

AN EMPLASTRUM

Sig.: Apply $\frac{1}{8}$ " thick over affected area. Repeat application every 8 hrs.

In upper respiratory as well as chest conditions, the continuous analgesic-decongestive action of Numotizine is comforting.

INDICATIONS:

Pneumonitis

Tonsillitis

Boils

Pharyngitis

Bronchitis

Arthritic Pain

Glandular Swellings

Laryngitis



FORMULA:

Guaiacol	2.60
Beechwood Creosote	13.02
Methyl Salicylate	2.60
Sol. Formaldehyde	2.60
C. P. Glycerine and Aluminum Silicate q. s.	1000 parts

Numotizine is ethically presented—not advertised to the public.

NUMOTIZINE, Inc., CHICAGO

1, 8, 15, 30 ounce jars



of deaths among American M.D.'s.

Offsetting the virtually normal loss from death, medical schools in the United States sent forth 5,163 graduates in 1942, resulting in a net increase to the profession of 1,810. The increase does not include the graduates of foreign schools first licensed in this country last year; statistics for this group are not yet available.

Blue Cross Grows Fast

Blue Cross hospital-service insurance plans now have some 11,000,000 members and their benefits are within the financial reach of seven of every eight persons in the United States and Canada according to the American Hospital Association. More than 2,000,000

members being added yearly. The plans paid benefits of nearly \$50,000,000 in 1942.

Lower Vaccination Fee

A vaccination fee less than the usual office charge is advocated by the Philadelphia County Medical Society. Though recognizing the legitimacy of the standard fee, the society remarks that this practice tends to send patients to free sources "at the very time we are menaced by state medicine."

Rubber Substitute

A new flexible tubing made of a synthetic material resembling rubber is being marketed for hospital, medical, and general laboratory use. In some ways it is said

Winter time is the season of throat afflictions. Many physicians have found Thantis Lozenges to be effective in relieving throat soreness and irritation, because they are antiseptic and anesthetic for the mucous membranes of the throat and mouth.

Thantis Lozenges

contain Merodicein (H. W. & D. Brand of Diiodooxymercuriresorcinulsulfonphthalein-sodium), 1/8 grain, and Saligenin (Orthohydroxybenzylalcohol, H. W. & D.), 1 grain. They dissolve slowly, permitting prolonged medication with the two active ingredients.

Thantis Lozenges are effective, convenient and economical.

Thantis Lozenges are supplied in vials of twelve lozenges each.

HYNSON, WESTCOTT & DUNNING, INC.

Baltimore, Maryland



GLYCO-THYMOLINE is helpful

An alkaline solution that
loosens and dissolves sticky
mucous secretions. Soothing
to irritated mucous membrane.
Helps to restore normal tone.



**When Colds and
Throat Irritations
Threaten Comfort**

KRESS & OWEN COMPANY, 361-363 Pearl Street, New York

to offer advantages over rubber: Reportedly, it does not deteriorate chemically with age; is not affected by air, sunlight, or other oxidizing materials; does not swell in oil or water; and is impervious to many solvents. The material is said to be inert to attack by almost all acids, alkalies, and other corrosive substances. It is manufactured in the United States by the U.S. Stoneware Company.

Life-Saving Flights

Airlines have been authorized to sell tickets under a new Class 5 priority whenever a "life-and-death" emergency makes travel by air essential. Thus, a physician called on an emergency case or a patient in critical condition en route to a hospital will be eligible to purchase air transportation.

Alien Doctors Helped

As a remedy for the nation's acute shortage of civilian doctors, the Immigration and Naturalization Service is speeding up the naturalization of alien physicians. In the cases of practicing

alien medical men, or aliens who would be qualified to practice if they were citizens, the Federal agency is expediting the filing of petitions for naturalization and is holding hearings in advance of their regular order.

The expediting order supplements instructions issued to the service in January 1942 for similar action on applications for citizenship submitted by aliens in the armed forces or engaged in war work. Doctors are not required to obtain certification from war agencies to obtain preference in naturalization. In issuing the order, the Attorney General pointed out that the new procedure does not affect the statutory requirements for naturalization, but merely expedites the handling of petitions.

Many States, by statute or by ruling of licensing boards make citizenship a prerequisite to admission to State licensing examinations. Others issue temporary licenses, subject to cancellation unless citizenship is obtained within a specified period.

Chicago has been legally au-

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In Sealed
Packages Only

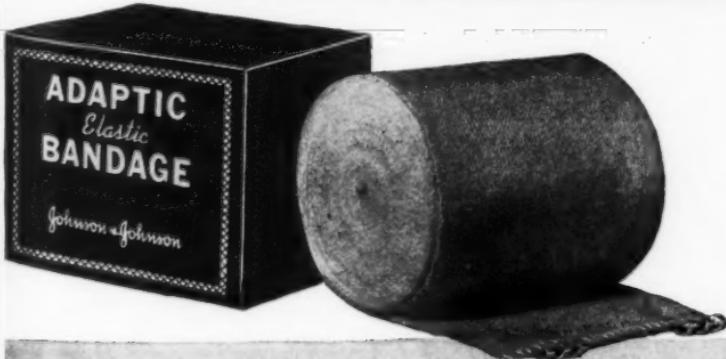
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ADAPTIC preferred!

The ADAPTIC BANDAGE, as an elastic, rubberless support, is recommended for use in strains, sprains, and various joint ailments; in the treatment of varicose veins; to hold large wound dressings in place in the prevention and treatment of certain muscular injuries; and in other instances where this approved bandage will provide elastic support with comfort.

Available in four convenient widths

[When an adhesive elastic bandage is required, Elastikon is recommended]



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NEW BRUNSWICK, N. J. CHICAGO, ILL

LOOK FOR THE NAME

✓ **Bathinette***
COMBINATION BATH AND TABLE

Every expectant mother should know about the "Bathinette," a real time saver when the baby comes. The complete "Bathinette" is equipped with Hammock with a headrest that holds the baby's head up and gives mother both hands to use—**really a Third Hand**. In addition a baby spray is provided to cleanse the baby from the soiled water.

THE BATHINETTE
COMBINATION BATH
AND TABLE IS THE
LARGEST SELLING
INFANTS' BATHING
DEVICE IN THE
WORLD. FREE BOOK-
LET AND SPECIAL
DISCOUNT TO DOCT-
TORS. ASK FOR IT.



The "Bathinette"
way is the
accepted way.

*Trade Mark Reg. U. S. Pat. Off. and in Canada

BABY BATHINETTE CORPORATION
Dept. E, Rochester, N. Y.



HIGH-STRUNG

War efforts and strenuous days bring to high-strung individuals nervousness and insomnia. The physician can rely on well tolerated, non-habit-forming

PENTABROMIDES

Brand of Combined Bromides

A palatable, non-alcoholic syrup containing a total of 15 grains of five carefully selected and balanced bromide salts per fluidram. Pint bottles.

T.M. "Pentabromides" Reg. U. S. Pat. Off.

MERRELL

THE WM. S. MERRELL COMPANY

CINCINNATI, U. S. A.

thorized to hire alien internees and resident physicians on a temporary basis for work in the Municipal Contagious Disease Hospital. The authority had been requested by the president of the Board of Health, who said it would be necessary to close the hospital unless the supply of doctors was augmented.

Dobbin's Comeback

The horse-and-buggy doctor is staging a comeback in Manitoba, Canada. Dr. P. H. McNulty is now making his calls in a one-horse power rig drawn by a chestnut mare.

M.D.'s in Palestine

"Too many doctors" would seem to be a Ripley item nowadays, but it is reported to be a fact in Palestine. Physicians there are said to total about 3,000—or one for every 500 inhabitants. This surplus, together with the prevailing poverty, reportedly compels some M.D.'s to accept fees of as low as a shilling (amounting to twenty cents in American money) a call.

Druggists Need Gas

Pharmacists are complaining that in many instances the meagreness of their gasoline rations restricts their ability to make prompt delivery of medicines. Their plea has been taken up by the Westchester (N.Y.) Medical Bulletin, which comments: "Physicians will not ask for additional gasoline rations to enable pharmacists to deliver ice cream, but the delivery

BA

BACK HOME AT 4.. AND WITH AN APPETITE

For the normal as well as the undernourished child, a tasty between-meals snack of Horlick's Fortified offers an excellent tide-over to the next full meal.

Instead of loading up with appetite-destroying confections or sweet drinks of poor food quality, why not let them benefit from the basic, nutritive and protective elements found in Horlick's.



HORLICK'S FORTIFIED

provides rich protein, carbohydrate and fat in balanced proportions, calcium and other essential minerals, together with maintenance doses of A, B₁, D and G.

Moreover Horlick's is partially predigested, homogenized, has negligible curd tension and, therefore, leaves the stomach rapidly enough to avoid destroying appetite for the next full meal.

Recommend
HORLICK'S
The Complete Malted Milk—Not Just a Malt Flavoring for Milk.

HORLICK'S

YESTERDAY—
"Feminine frailty"

TODAY—

MANAGEABLE FUNCTIONAL ABERRATION

GONE is the complacence with which (too frequently) menstrual irregularities used to be dismissed as mere evidences of "feminine frailty." Today, functional expression which passes the borderline of physiologic limits is recognized as often amenable to effective symptomatic therapy.

For such purpose, Ergoapiol (Smith) constitutes a highly efficient emmenagogue. Its unique inclusion of all the alkaloids of ergot (prepared by hydro-alcoholic extraction) assures a balanced action—synergized by the presence of apiol (M. H. S. Special), oil of savin, and aloin. By helping to induce pelvic hyperemia, and stimulating smooth, rhythmic uterine contractions, Ergoapiol often provides welcome relief.

It also constitutes a desirable hemostatic agent to aid in the control of excessive bleeding. And as an oxytocic, it is frequently of benefit in facilitating involution of the postpartum uterus.

For a full discussion, send for copy of the booklet "The Symptomatic Treatment of Menstrual Irregularities."

Indications: Amenorrhea, dysmenorrhea, menorrhagia, metrorrhagia, in obstetrics.
Dosage: 1 to 2 capsules 3 to 4 times daily.
Supplied: In ethical packages of 20 capsules.

MARTIN H. SMITH CO.
150 LAFAYETTE STREET, NEW YORK

ERGOAPIOL

THE PREFERRED UTERINE TONIC

of medication is essential. Some arrangement must be developed to enable the prescription pharmacist to make such deliveries promptly."

Hospital Suspends

New York City has closed temporarily its Neponsit Beach Hospital for Children at Rockaway Beach to help meet a 10 per cent reduction in the city's fuel oil allowance. Other city institutions have absorbed the patients and personnel. The hospital will reopen in the Spring after the fuel shortage becomes less acute.

Stork's Busiest Year

Obstetricians had their busiest year in the Nation's history in 1942. Deliveries totaled more than 2,800,000, a peak rivaled only in 1921, when the previous record of 2,600,000 was set, Metropolitan Life Insurance statisticians report. The upward curve, characteristic of wartime, has carried the birth rate to 21 per 1,000, the highest in fifteen years. This, however, falls short of the World War I record of 25 per 1,000.

Castor Oil Saute

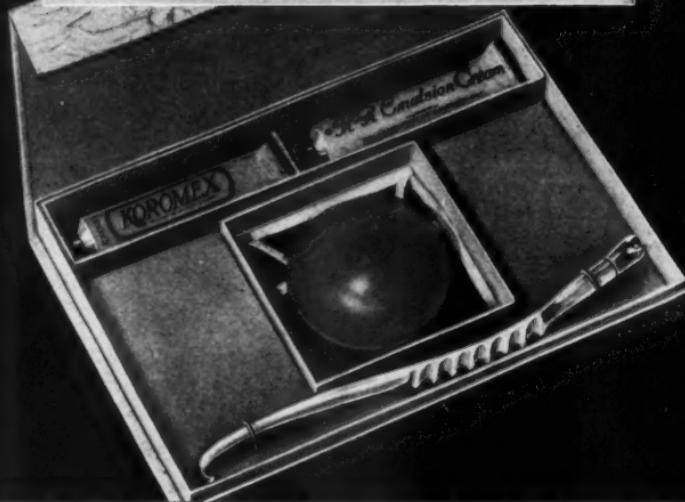
A diarrheal epidemic among the portly customers of a Rotterdam restaurant recently brought a swift inquiry. Findings: The harassed proprietor, unable to get his usual cooking fat, had accepted an inferior substitute at a stiff \$2 a pound and had used it to savor minced meat. Analysis of the fat showed 70 per cent castor oil and

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Approved
Contraceptive Technique*



"THE KOROMEX SET COMPLETE"

Koromex Set Complete* is an attractively packaged unit containing the important items used for approved contraceptive technique. Identified by a removable label. To order or prescribe, merely write, "Koromex Set Complete, Diaphragm Size ____".

Each Unit Contains...

KOROMEX DIAPHRAGM—The outstanding, most durable diaphragm in use today. With specially designed sanitary pouch.

KOROMEX TRIP RELEASE INTRODUCER—Specially designed swivel tip facilitates usage. Gauged to take all size diaphragms.

KOROMEX JELLY and H-R EMULSION CREAM—Both preparations have equally high spermicidal value, but differ in degree of lubrication. Both are included so the patient may determine which preparation better meets her requirements and personal preferences.

* Price of Koromex Set Complete is only that of the Koromex Diaphragm and Koromex Trip Release Introducer.

Holland-Rantos
Company, Inc.

551 FIFTH AVENUE, NEW YORK, N. Y.



KONDREMUL *The Corrective Regimen*

To encourage natural elimination, Kondremul provides a regulative form of bowel therapy, mixes thoroughly with the fecal mass and maintains an even dispersion all the way through the gastrointestinal tract.

This palatable emulsion is made with Irish Moss (*chondrus crispus*) and contains 55% of mineral oil.

In three forms for three types of constipation—

Kondremul Plain—for simple constipation.

Kondremul with non-bitter Extract of Cascara—for atonic, senile and pregnancy constipation.

Kondremul with Phenolphthalein (2.2 grs. phenolphthalein per tablespoonful) for obstinate cases.

Send for booklet—
“Bowel Hygiene
in Rectal Diseases.”

THE E. L. PATCH COMPANY

Boston

Mass.



30 per cent fatty acids and ersatz soap.

Harvard Emeriti Back

A trend toward the full use of America's professional potential is indicated in the recall of five professors emeriti by Harvard Medical School for active service at the institution. They are: Drs. David Cheever, Henry A. Christian, John Homans, Franklin S. Newell, and William C. Quinby, all of Boston.

Spanish Study Urged

The teaching of Spanish and Portuguese to medical students as a means of promoting Pan-American amity has been proposed by the American Urological Association.

Best Sellers for M.E. Readers

SEE HERE. PRIVATE
HARGROVE —Marion Hargrove

SUEZ TO SINGAPORE

—Cecil Brown

NEW YORKER WAR ALBUM

One of these (or any other single-volume best-seller) is waiting for every MEDICAL ECONOMICS reader who submits an acceptable idea on the business side of medicine. The idea may be a time-saver, work-saver, expense-saver, or practice-builder. Address MEDICAL ECONOMICS, Rutherford, N.J.

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Test organism
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Strept. hema
Pseudomonas
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Compare

1 AN EFFICIENT GERMICIDE

BARD-PARKER FORMALDEHYDE GERMICIDE

with any solution commonly used for the disinfection of surgical instruments...

VEGETATIVE				SPORE					
Test organism	PUS		BLOOD		Test organism	PUS		BLOOD	
	wet	dry	wet	dry		wet	dry	wet	dry
Staph. aureus	½	½	½	2	B. anthrasis	¼	¼	1	1
Strept. hemolyticus	½	½	½	*	Cl. tetani	18	18	18	18
Pseudomonas pyocyannea	½	½	½	1	Cl. welchii	1	2	4	4

*Controls negative—did not resist drying

2

CONSERVES THE BUDGETED DOLLAR

When used as directed, the Solution will not rust, corrode or otherwise damage steel instruments, glass or heat-treated rubber.

The Solution is non-injurious to the keen cutting edges of surgical knives and scissors, and delicate surgical instruments . . . thus serving to safeguard the surgeon's and hospital's instrument investment.

The Solution retains its high germicidal effectiveness over long periods of use if kept undiluted and free of foreign matter.

Ask your dealer

PARKER, WHITE & HEYL, INC.
DANBURY, CONNECTICUT

R.P.

A B A R D - P A R K E R P R O D U C T

tion. Asserting that the linguistic barrier between the Good Neighbor nations might be lowered considerably if scientific intercourse among physicians were facilitated, the association has recommended a minimum of two years of Spanish or Portuguese, or both, as a pre-medical requirement.

Army Hiring M.D.'s

Civil service positions for civilian physicians are available in army-operated industrial plants. Service commands are hiring such doctors to release medical officers for duty with troops. Woman physicians are to be employed where large numbers of the employees are women. Forms 57 and 2398, for the use of applicants, as well

as a bulletin on physicians' examinations, are available at a first or second-class postoffice.

"Dr." Misuse Curbed

Unjustified use of the title "Doctor" by optometrists has involved remedial steps by the New York State Department of Education. The Westchester County Medical Society informed the department that local newspapers commonly used "Dr." with the names of optometrists, and was assured that the abuse would be stopped.

AMA Session in June

The American Medical Association's house of delegates will thresh out many problems associated with the war's impact.



FOR
Aminoacetic Acid and Vitamin
B₁ in effective combination,
Prescribe

Thi-amino

With the regular diet or in convalescence it assists muscular metabolism, restores normal appetite and increases nervous efficiency. Supplied in original 12 ounce bottles.

Dose: One tablespoonful three times a day. This supplies 90 grains Aminoacetic Acid and 333 International Units B₁ per day.

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*Reg. U. S. Pat. Off.

medicine when it convenes in Chicago on June 7. The meeting has been substituted for the association's ninety-fourth annual session, which was to have been held in San Francisco this year. The task of distributing physicians to meet civilian and military requirements is to be the focal topic of the delegates' session.

Anatomy Pioneer Dies

Many an anatomical model was designed by Charles Howell Ward, pioneer in the commercialization of this scientific art, who died last month at the age of 80 in Rochester, N.Y. The stuffing of Jumbo, P. T. Barnum's famed elephant, was one of his many publicized achievements. Once a soldier of fortune, Ward succeeded his father, who founded Ward's Natural Science Establishment in Rochester.

Fees as Tax Factor

Of interest to medical men in the thirty-three States that impose income taxes is Governor Thomas E. Dewey's proposal to

the New York State Legislature that "reasonable" deductions above-average medical expenses made permissible under the State income tax law. The Governor so advocates the establishment of a compulsory sickness insurance scheme for the State.

What They're Reading

[Continued from page 75]

municating agent was a Mrs. Michaelis, wife of a Corlears Heights dentist.

Ypsilon found time to interest herself in nonmedical trivia, too. Through Mistress Michaelis at a dance in New York one night, she informed the doctor: "George your barn is burning." The barn was Snowhill in Maryland.

Another time, the biographer gravely assures the reader, Ypsilon prompted the dentist's wife to write from the Hook to Snowhill, "You are driving a stake in your wife's field," which, by Heaven, the doctor was.

Old Vandegrift hypnotized patients to cure them of things he



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In Indigestion and Dyspepsia

Dose: One or two tablets with meals.

Samples and literature on request.



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—many are operating 24 hours a day —obviously called for new engineering achievements. And by henceforth applying them also to G-E medical x-ray apparatus, the profession likewise is bound to benefit.

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temporary blindness or of paralysis induced by hysteria. He conjured Mrs. Reagan, an insomniac, into falling into sound sleep at 10 o'clock each night for three months, but, as in some other cases, carelessly forgot to dismiss the spell. One evening, 10 o'clock and deep slumber overtook Mrs. Reagan at a play, and the doctor had to go to the playhouse to undo the effects of his forgotten prescription. He anticipated twilight sleep by some forty or fifty years, using hypnotism instead of scopolamin, his son recalls, and as a special service for favorite patients would put them into a trance so they could have teeth drilled or extracted by the local dentist.

Vandegrift pere toyed with the psychic and the occult to the end.

He foretold, two weeks in advance according to the author, the hour and day of his own death. Sure of his infallibility in such prophecy he even arranged all details for his own funeral. It worked out just as he had predicted, but his son has forgotten the date of his death. Anyway, he was 82 when he died.

The book, incidentally, gets its title from Dr. Vandegrift's favorite drugs. He used castor oil and quinine almost universally for internal and external treatments. Among his numerous patients he established trust in these sovereign remedies by constant use of both on his own sacred person. He rubbed them on his hair to prevent hair falling out, on his hands to keep his fingers soft and supple.

[Turn the page]

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INTERNAL IODINE MEDICATION with Hyodin (formerly Gardner's Syrup of Hydroiodic Acid) helps stimulate bronchopulmonary membranes and promote secretion and liquefaction of mucus. Still less toxic, more palatable. Each 100 cc. contains 1—1.5 gm. of hydrogen iodide (resublimed iodine value averages .85 gr. in each 4 cc.). Dosage: 1 to 3 tsp. in ½ glass water ½ hr. before meals.

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This demulcent expectorant provides effective soothing relief of local inflammation, makes the cough more productive and less fatiguing. Contains no opiates or sedatives. Each 30 cc. contains 1.05 gm. of ammonium hypophosphite (16 gr. in 1 fl. oz.). Dosage: 1 to 2 tsp. p. r. n.

Together, these preparations provide a potent combination for the treatment of chronic bronchitis, influenza, grippe, common cold, bronchial dyspepsia, unresolved pneumonia, and pleurisy.

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†Fowler and Borer: "Rate of Hemoglobin Regeneration in Blood Donors." J.A.M.A., 118:421, 1942.

*Reg. U. S. Pat. Off.

THE BOVININE COMPANY • CHICAGO, ILLINOIS

This is the biography of a real doctor, but somehow it seems more like a portrait drawn for Hollywood.

Nine Days in a Lifeboat

[Continued from page 51]

upon them. Dully they watched the freezing spray dash over the lifeboat's gunwales, felt it on their faces and hands. Most of them had lost the will even to brush it away. They were sinking into the dim haze of death. But the handful of men who could still move made a last effort: They lowered the sail and stretched it across an oar to shelter themselves and their helpless companions.

Dr. Adam Egede-Nissen told me about those nine days when the lifeboat pitched in the swells off the fog-swathed banks of Newfoundland and hope vanished like the last ember of the burning ship he had left behind.

We sat in Fraunces Tavern, famous old restaurant of the Wall Street district, survival of George Washington's days in New York. Sometimes as he talked the young

doctor would glance quickly at the room and shake his head as if he couldn't believe much luxury was real. A day of the chief medical officer of Royal Norwegian Medical Corps he said he had been ordered to New York from a post in Iceland.

His ship, a Norwegian oiler, had been separated from a convoy in a gale, and was making port alone. Off Newfoundland a torpedo struck.

"It was about 10:30 at night," the doctor recalled. "I was sitting in the pantry when the ship shuddered violently. We were ordered to the boats at first, but when the ship kept moving ahead, the captain decided to try to save her."

For four hours more the wounded tanker kept to its course. Then a second torpedo holed her a few seconds later, a third. The ship heeled over, and with difficulty the crew swung four lifeboats onto her listing side.

"Two men fell overboard," the doctor continued. "We heard the cry for help in the dark, but the wind drove us away from them. Our lifeboat was leaking. Half

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In providing a protective film to the nasal mucosa, "Pineoleum" also gives safe vasoconstriction with soothing, cooling relief. That's because it contains camphor (.50%), menthol (.50%), eucalyptus (.56%), pine needle oil (1.00%), and oil of cassia (.07%) in a base of doubly-refined liquid petrolatum—plain or with ephedrine (.50%).

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Formula: Chemically
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For those frequent injuries that occur in the home — the "Moist Heat" of an ANTIPHLOGISTINE pack brings immediate relief.

Instruct the patient to apply ANTIPHLOGISTINE comfortably hot — in order to ease the pain, reduce the swelling and promote healing.

ANTIPHLOGISTINE is a ready-to-use Medicated Poultice. It maintains moist heat for many hours.



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Formula: Chemically pure Glycerine
100% Iodine 0.01% Boric Acid
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NICOTINE CONTENT Scientifically Reduced to LESS than 1%



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tobacco smoke. With Sano, the nicotine is actually removed from the tobacco itself. Sano guarantees always less than 1% nicotine content. Yet Sano are a delightful and satisfying smoke. Cigarettes - Cigars - Pipe Tobacco

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For Physicians

WARNING

Chemical analyses show that pinches of cotton used in cigarette mouth-pieces are entirely ineffective in removing any appreciable amount of nicotine from cigarette smoke.

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M.D. _____

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hour passed, then the U-boat began shelling our tanker. The shell crashed into her for forty-five minutes. She sank slowly, a huge hole on the sea."

In the darkness that descended after the flaming ship sank, the doctor's lifeboat strayed away from the others. When dawn came the look-out sighted the missing lifeboats. Two were damaged and the men in them were transferred to the doctor's craft. The third boat drifted away later and was never seen again.

"There were twenty-four of us in the one boat," the medical officer went on. "Some were in critical condition. Our water ration was half a glass a day. We couldn't eat the dried meat we had because it was too salty. Biscuits were our only food."

For two days snow swirled about the lifeboat, blanketed the ocean, shut out even the sky. The captain was in a high fever and delirious. On the third day the engineer died from exposure. One day it rained, and the survivors lay in the lifeboat with their mouths open to catch the drops. After the rain came incredible cold. The men took to eating the ice that covered the boat, even though it was frozen salt water and made them thirstier. On the ninth night the doctor and the second mate crept to a young boy who was sinking into a coma. The mate covered him with his own body for warmth. They attempted artificial respiration. But the boy died under their hands. The



MORALE IS A LOT OF LITTLE THINGS *(as you, Doctor, know better than most)*

LIKE THE FIRST BRAVE CROCUS, for instance, that pops out of the grass on a raw spring day . . .

That's one of the little things almost guaranteed to cheer you up. The first crocus . . . that letter the censor thought was like a million others . . . a lift to work in a neighbor's car . . .

Little things, sure. But they mean a lot, somehow. They keep us smiling . . . they build *morale*.

* * *

It happens that millions of Americans attach a special value

to their right to enjoy a refreshing glass of beer . . . as a beverage of moderation after a good day's work.

A small thing, surely. And yet —morale is a lot of little things. Little things that lift the spirits, keep up the courage . . . that are part and parcel of our own American way of life.

And, after all, aren't they among the things we fight for?



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10% SULFATHIAZOLE OINTMENT (HART)

A valuable supplement to the usual surgical procedures in Acutely Infected Superficial Wounds; Varicose, Diabetic and Decubitus Ulcers; Boils and Carbuncles. Supplied in 1-oz., 1-lb. and 5-lb. jars.

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A greaseless cream which dries rapidly and forms an adherent, slightly astringent film. For the treatment of Impetigo and Other Superficial Skin Infections of Coccid Origin. Supplied in 1-oz. and 1-lb. jars.

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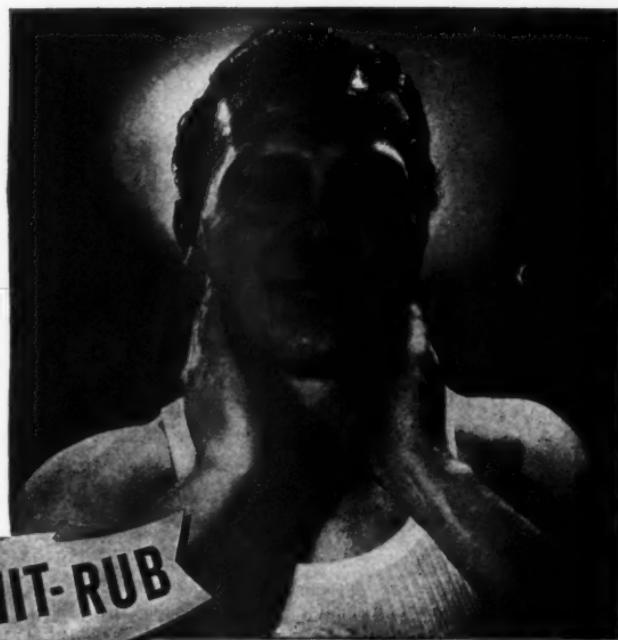
State _____

night the doctor actually fought with another man to stay warm. The exercise kept them from freezing.

"I didn't want to die," the doctor told me, "although I knew it would not be painful to freeze to death. But I thought it would be senseless to give up."

He was right. The next morning some of the men heard it - high, distant drone in the sky. It was an American plane. The pilot spotted them, circled overhead. Then a package dropped. It contained the pilot's and the co-pilot's lunches: sandwiches, fruit, and a steel thermos jug of coffee. It held too, a promise of life for the survivors. Five hours later rescue came. First it was a faint smudge of smoke on the horizon. Then it was the warm cabin of a destroyer, and food and medicine. But the rescue came too late for some. The captain died aboard the destroyer. Another man succumbed after he reached shore. Still another man had to have both legs amputated.

Today Dr. Egede-Nissen is on duty at the Norwegian Public Health Service hospital in downtown New York City. There, five doctors and three nurses take care of as many as 150 patients a day, most of whom are fellow-Norwegians, sailors who speak little English and who are pathetically grateful to hear their own language. Some suffer from nerves shattered by as many as six consecutive torpedoings, but all are eager to return to the sea. Typical



MINIT-RUB

**... comforting adjuvant in
uncomplicated colds for the patient**

MINIT-RUB acts promptly to relieve the discomforts and feeling of "tightness" which may occur in uncomplicated colds. Massage with MINIT-RUB — counterirritant, analgesic, decongestant — brings fresh, new blood and comforting warmth to affected areas. Through reflex action, MINIT-RUB does its good work beneath the skin. MINIT-RUB is valuable in relieving pain and aches of simple neuralgias and myalgias . . . Literature on request.

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STAINLESS • GREASELESS • VANISHING

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was a 21-year-old gunner, impotent over being invalidated by a shell splinter in the eye. He pleaded that he closed that eye anyway when he was aiming.

At the hospital Dr. Egede-Nissen waits eagerly for orders. But he waits even more eagerly for the day when he will stand on the deck of a ship sailing to a free Norway.

—ROY PINNEY

SPEEDY-EASY-EFFICIENT TREATMENT FOR FUNGUS INFECTIONS

Speed and efficiency are what count in these busy days. Speed and efficiency are what you get when you treat fungus infections with KORIUM.

The use of KORIUM offers:
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RELIEF — of pruritus assures patients' cooperation.

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Few untoward reactions are so discouraging as the excessive salivation, nausea, cough, vomiting of iodine intoxication imposed upon the patient already burdened with respiratory disease. Amend's Solution obviates this threat—it combines the mucus-liquefying, expectorant action of iodine, so valuable in bronchitic affections, with dependable nontoxicity.

Thos. Leeming & Co. Inc.

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Legal Questions

[Continued from page 40]

tain medical treatment, and so other person called the doctor the injured person is liable. If the victim was conscious and accepted the treatment proffered, he is likewise liable. In either case, the law infers an agreement to pay

Q. Is a compensation insurance company liable for the bill of physician who, in an emergency when a company-designated doctor is not available, treats a person insured through his employer with that company?

A. Yes. However, it must be clear that the treatment required was of an emergency character. Subsequent treatment should of course be given by the company physician. It should not be rendered by the first doctor.

Q. What is a widow's legal responsibility for medical care rendered to her deceased husband? I treated a patient recently for coronary closure. It was the patient's wife who called me pri-

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to each visit. Her husband's estate consists solely of insurance.

A. If the insurance is payable to the estate, the estate is liable. If it is payable to the widow, the widow is liable and the physician is obliged to seek payment from her.

Q. Is it unethical for a physician to talk freely to other members of his family about the negligence of a doctor who has attended one of the family—assuming that the facts bear out his conviction that the doctor was negligent? Should the physician use his influence to prevent a member of his family from suing another doctor for negligence? In case a member of the family insists upon suing another doctor, what should be the attitude of the physician-member of the family?

A. Under no moral code or code of law is anyone, physician or not, obliged to prevent another from exercising a right he may have. In this case the injured person obviously has a just claim against a negligent physician. It must be assumed that as a result

of this negligence the patient suffered damage. The law provides him with a remedy by which he can obtain compensation for damages. The physician-member of the family is not obliged to abstain from free discussion of the right of the injured person. In fact, the bond of kinship would seem to give him more than a passing interest in seeing that his relative obtained just compensation. It would be defeating the ends of justice if he prevented his relative from bringing action.

Q. Should a physician treat minors who go to his office unaccompanied by their parents or guardians? In the event a minor is making his own living, are his parents or guardians responsible for his medical bills?

A. A physician does not have the right to treat a minor, except in the event of serious emergency, without the consent of the parents or guardians. The written or oral permission of the parents or guardians should always be obtained before treatment is rendered. Otherwise, responsibility

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3 minutes!

The ligature method, introduced by THE ROSS CIRCUMCISION RING simplifies and speeds your work. It eliminates the objectionable features of cut-modified procedures. A safer, bloodless technique, more satisfactory to you, and your patients. Write L. G. Galbraith Co., P. O. Box 896, Portland, Oregon, for literature.

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BURNHAM SOLUBLE IODINE

Well-tolerated, active iodine. As alterative prescribe 15-25 drops t.i.d., well diluted, 15 minutes before meals.

A sample will convince you

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For clinic
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Don't let food shortages undermine your patient's health

LEADING authorities agree that much minor sickness can be traced to a lack of essential nutrients in the average diet. And today's food shortages—together with rising food costs—will make it increasingly dif-

ficult to obtain an optimal diet.

In this emergency, Vimms can be of assistance to the busy physician. They offer a sure way to prevent minor ailments resulting from vitamin-mineral deficiencies.

VIMMS MEET OR EXCEED MEDICAL RECOMMENDATIONS*

Medical recommendations are based on these Gov't standards	See how 3 Vimms meet or exceed these standards
VITAMIN	
4,000 USP Units	A 5,000 USP Units
1.0 Milligram	B ₁ 1.0 Milligram
2 Milligrams	B ₂ (G) 2 Milligrams
30 Milligrams	C 30 Milligrams
400 USP Units	D 500 USP Units
10 Milligrams	P-P 10 Milligrams (Niacin Amide)

In addition, Vimms supply these vital minerals:

CALCIUM	375 Milligrams
PHOSPHORUS	250 Milligrams
IRON	10 Milligrams

*Jour. of the A. M. A., July 18, 1942, pp. 948-9

Why many doctors recommend Vimms

Vimms are complete. Vitamin deficiencies rarely occur singly. Vimms provide *all six* essential vitamins, as well as the three minerals most commonly lacking in the diet.

Vimms are adequate. Minimum daily requirements have been established by the Government for all six vitamins. Vimms meet or exceed these requirements. (See chart.)

Vimms are balanced. Medical councils have established the proper ratios for compounding supplements. Vimms are balanced in these ratios.

Vimms are palatable, low in cost. 50¢ for 24 tablets; \$1.75 for 96 tablets; \$5.00 for 288 tablets. And no product at any price matches all Vimms advantages.

Vimms

all the vitamins known to be essential
all the minerals commonly lacking

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for the medical bill may be successfully denied.

The earnings of a minor belong to the parent. The fact that a minor earns his own living does not remove him from the category of minors and does not change the liability of his parents or guardians for medical bills arising out of treatment rendered to him with their consent. Of course, if the minor has reached the age of 18 and has been publicly emancipated by his parents, they then renounce any right to his earnings and he becomes liable for his own medical bills.

—JAMES R. ROSEN, M.D., LL.M.

Ration Board Notes

[Continued from page 47]

sure] on those members who tend to be lax and over-generous."

Asked by MEDICAL ECONOMICS to list both general and specific recommendations for physicians, OPA officials have emphasized two in particular:

The first recommendation is that the doctor submit a certificate only when, in his good judgment,

the consequences of a denied supplemental ration would be serious. "Let him bear in mind that any extra allotment of a mentioned commodity is just that much subtracted from an already short supply. Considerations of mere comfort or convenience for the patient should, in our opinion, be disregarded."

The second major point: Doctors are urged to be as specific as possible. Their statements need not be technical and exhaustive in detail, but they should give the rationing board good reason for granting each request. In other words, the physician should not regard his statement as he does a prescription, which he assumes a druggist will fill simply because a doctor's name is on it."

Here are a number of more detailed suggestions, from both professional and OPA sources:

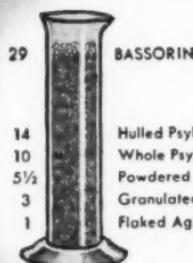
1. Secure the patient's permission to reveal such confidential information as may be required. It will not always be necessary of course to reveal a diagnosis; and in some circumstances the patient's permission is perhaps implicit in

CYSTOGEN *Still* The Dependable
URINARY ANTISEPTIC

METHENAMINE IN ITS PURE FORM

JRAPID in action and yet well tolerated, Cystogen is the ideal antiseptic agent in most non-tuberculous infections of the urinary system. When protracted treatment is indicated, or in cases requiring continuous treatment between the use of more drastic drugs, Cystogen is especially useful. As contrasted with the effects of more severe antiseptics, it is noteworthy, particularly in office practice, that many patients tolerate methenamine (Cystogen) and remain ambulatory. Cystogen eases renal and vesical pain, flushes the genito-urinary canal from the kidney to the meatus; and makes fetid urine non-odorous and non-irritating. Prescribed in cystitis, pyelitis, prostatitis, urethritis and other G-U infections. In 3 forms: Cystogen Tablets, Cystogen Lithia, Cystogen Aperient. Samples on request, Cystogen Chemical Co., 190 Baldwin Ave., Jersey City, N.J.

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Hulled Psyllium Seeds
Whole Psyllium Seeds
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Bulk-producing properties
of bassorin in water com-
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MOISTURE FOR MOBILITY



Free-flowing mobility
of Bassoran in water.

plus
**ANTACID-
ADSORPTIVE
ACTION**

*Bustedo, W. A.: Materia Medica, Pharmacology and Therapeutics, 4th Edition, Philadelphia, W. B. Saunders and Company, 1938.

Thus is provided a well-rounded, physiologically rational treatment for chronic constipation, in one product—

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Brand of Sterculia Gum and Magnesium Trisilicate

Prepared from sterculia gum (bassorin), Bassoran produces a well-formed stool of sufficient bulk and moisture to insure easy, comfortable passage without irritation.

In addition, Bassoran contains

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Available as Bassoran Plain and Bassoran with Cascara—both in 7-oz. and 25-oz. bottles.

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his request for certification. But in doubtful cases, the physician who receives explicit permission is playing safe.

2. Summarize in lay language the medical condition requiring a supplementary ration.

3. Mention how long the extra allotment will be needed and how much of the commodity will be required during that time.

4. Touch upon the medical consequences which are foreseen as likely if the application is denied.

5. Conclude by stating that you certify to the OPA that the statements made are true to the best of your knowledge and belief.

6. In documenting a patient's request for an extra ration, be sure your statement covers the following points listed after each commodity:

Sugar. Why it is needed; how much is needed; and for how long.

Fuel oil. Why an above-normal temperature is needed; the minimum temperature that must be maintained; and the number of days that this temperature must be maintained.

Processed foods (canned and

certain frozen foods). Why the basic ration is inadequate; why unrationed foods are inadequate; and how much is needed during a specified period.

Gasoline. (A physician's statement is not essential for extra allotments of gasoline, but is customary when a patient's request is based on grounds of obtaining "necessary medical attention or therapeutic treatment.") Describe the nature of the case, and certify to (a) the necessity for care, (b) the approximate number of visits required over a specified time, and (c) the fact that "the patient could not possibly travel by any other available means than by automobile."

Stressed by the OPA in its suggestions to the profession is the need for conservatism in acceding to patients' requests. Says one official:

"In perfect good faith many medical men have been misled by the belief that a doctor's certificate is all a patient needs to get a special ration for driving to Summer and Winter resorts under the guise of securing 'therapeutic

FRANOL
REG. U.S. PAT. OFF.

EFFECTIVE CONTROL OF ASTHMA AND RELIEF
IN HAYFEVER with Benzylephedrine, a new ephedrine-like preparation with much greater antispasmodic action and with little or no effect on the central nervous system, in combination with Theophyllin and Phenobarbital.

Literature and samples on request

ALBA PHARMACEUTICAL DIVISION
WINTHROP CHEMICAL COMPANY, INC.
74 LAIGHT STREET, NEW YORK, N. Y.



An efficient analgesic which does not interfere with curative treatment is one of the physician's most useful therapeutic agents.

BAYER-TABLETS OF ASPIRIN

Due to its purity and the accompanying rapid disintegration in the stomach, Bayer Aspirin has been an outstanding therapeutic agent for over 40 years.

For relief in a wide variety of conditions—

COLDS NEURALGIA INFLUENZA

RHEUMATIC AFFECTIONS

FIBROSITIS DYSMENORRHEA

Each tablet of Bayer Aspirin contains the full dosage of the pure drug.



BAYER ASPIRIN



178 VARICK STREET

NEW YORK, N. Y.

STEP UP

the
RBC COUNT
and
HEMOGLOBIN

Your anemic patients will respond rapidly to VITAMIN B-COMPLEX plus LIVER plus IRON. This prescription supplies essential raw materials for red bone marrow regeneration.

HEMO-VITONIN (Vitonin with liver) provides per fluid ounce liver concentrate equivalent to 50 Gm. fresh liver, 0.42 Gm. (6½ grains) colloidal iron peptonate, 218 U.S.P. units Vitamin B₁ (thiamine), 340 gammas Vitamin B₂ (riboflavin), 220 gammas Vitamin B₆ (pyridoxine), 8 mg. nicotinic acid and 1.2 mg. pantothenic acid in a very palatable vehicle containing 14% alcohol.

The recommended dose for adults is 2 teaspoonsfuls three or four times a day; for children, 1 teaspoonful. Supplied in 8 ounce and gallon bottles.

HEMO-VITONIN *Vitamin B-Complex* plus LIVER plus IRON

BUFFINGTON'S, INC. Dept. ME-3
 Worcester, Massachusetts

Please send sample of HEMO-VITONIN.

Name M.D.

Address

City State

treatment.' This assumption is wrong. 'Therapeutic treatment' is very strictly interpreted to mean only ministrations given patients by practitioners themselves. Obviously, seasonal travel to resorts by automobile cannot be so considered. The acute gasoline and rubber shortages make it impossible to grant rations for such travel. It must be accomplished by public means of transportation or not at all."

A final OPA suggestion is directed at physicians who may be reluctant to turn down the request of a good patient: "Doctors can render a great service," it declares, "by refusing to write any letter which would have the effect of embarrassing conscientious War Price and Rationing Boards intent upon doing their plain duty."

—F. H. ROWSOME JR.

Speeding Your Reading

[Continued from page 50]

between calls at the office gives you a head start in your reading. Medical journals that arrive in the mail can be scanned, titles and

Sour Stomach

Faster relief with a soda tablet
 that tastes like candy
 Samples on request

Thousands of doctors are now prescribing a 6 grain tablet of sodium bicarbonate and aromatics called Carbex Bell. They report better results because Carbex Bell is so palatable the patient isn't aware he is taking soda so efficient, relief comes in a minute or so. Doctors know there is no question of alkalosis, acid rebound, laxation or constipation in the 30 grain dosage. One trial proves its value. Samples to doctors from Hollings-Smith Co., Inc., Mfg. Chemists, Orangeburg, N. Y.

RX DESITIN OINTMENT

The External Cod-Liver Oil Therapy

**USED EFFECTIVELY IN THE TREATMENT OF
Wounds, Burns, Ulcers, especially of the Leg, Intertrigo,
Eczema, Tropical Ulcer, also in the Care of Infants**

Desitin Ointment contains Cod-Liver Oil, Zinc Oxide, Petroleum, Lanum and Talcum. The Cod-Liver Oil, subjected to a special treatment which produces stabilization of the Vitamins A and D and of the unsaturated fatty acids, forms the active constituent of the Desitin Preparations. The first among cod-liver oil products to possess unlimited keeping qualities, Desitin, in its various combinations, has rapidly gained prominence in all parts of the globe.

Desitin Ointment is absolutely non-irritant; it acts as an antiphlogistic, allays pain and itching; it stimulates granulation, favors epithelialisation and smooth cicatrization. Under a Desitin dressing, necrotic tissue is quickly cast off; the dressing does not adhere to the wound and may therefore be changed without causing pain and without interfering with granulations already formed; it is not liquefied by the heat of the body nor in any way decomposed by wound secretions, urine, exudation or excrements.

DESTITIN POWDER

Indications: Minor Burns, Exanthema, Dermatitis, Care of Infants, Care of the Feet, Massage and Sport purposes.

Desitin Powder is saturated with cod-liver oil and does not therefore deprive the skin of its natural fat as dusting powders commonly do. Desitin Powder contains Cod-Liver Oil, (with the maximum amounts of Vitamins and unsaturated fatty acids) Zinc Oxide and Talcum.

Professional literature and samples for Physicians' trial will be gladly sent upon request.



Sole Manufacturer and Distributor in U. S. A.

DESTITIN CHEMICAL COMPANY

70 SHIP STREET

PROVIDENCE, RHODE ISLAND

authors noted, and the summaries at the ends of the articles read. This practice permits you to compile in advance a quota of "must" articles for reading later.

To sum up, the chief means of lightening your reading chores are definite hours, frequent notations of material read, association of ideas, and faithful adherence to a speeded-up schedule.

—MAX IMHOFF JR.

Collecting on the Spot

[Continued from page 35]

all right. You may pay what is convenient today and take care of the remainder when you pay for your visit next week." Or, depending on her estimate of him, she may merely accept his promise of payment the next week. The point is that her words, actions, and manner, though invariably courteous, are all predicated on the assumption that immediate payment is expected.

Let's assume that as he leaves your office Mr. Benson inquires "Should I pay you now or, um, will you send me a bill?" The sec-

retary pleasantly tells him the amount of the fee, and says, "You may pay now, if you like. I'll make out a receipt for you." Mr. Benson will probably pay. The receipt-book, let it be noted, has valuable secondary function: discourages the "charge it" impulse.

Your secretary must, it is evident, be a person of some experience and discernment to be safely entrusted with the duties described. This is particularly true when she uses more pointed gambits. If, for example, a doubtful pay patient begins a series of reasonably expensive injections and breezily instructs the secretary "charge it," she must phrase her reply with nice tact. Thus:

"As a rule it usually works better to pay for these visits as you go along. In that way the bills won't accumulate." Delivered with a pleasant smile, this statement will offend few (perhaps only those who had no intention of paying anyway.) But if the secretary is at all sharp or hostile, the remark will irritate anyone.

Not all of us choose to use

GLYKERON . . . a double-action antitussive

because it is



**1
MILDLY
SEDATIVE**

**2
STRONGLY
EXPECTORANT**

* It aids in breaking the vicious circle of coughs that are uselessly irritating or unproductive.

Dosage: For adults 1-2 teaspoonsfuls every 2-3 hours or longer; children in proportion.

Supplied: In 4 oz., 16 oz., and half-gallon bottles.

May we send you valuable brochure?

MARTIN H. SMITH COMPANY, 150 LAFAYETTE STREET, NEW YORK, N.Y.

The Newer Concepts of Meat in Nutrition

Meat . . .

in the Dietary of Diabetes Mellitus

SINCE protein needs of the diabetic patient are not lessened by "balancing" his diet and providing adequate insulin coverage, and since nitrogen equilibrium must be maintained, protein may well form the keystone of the planned diet.

Nitrogen imbalance, emaciation, and debility are frequently seen when the diabetic patient first presents himself to the physician. The deranged metabolism of ingested foods may have involved not only carbohydrates and fats but proteins well. Since carbohydrates in the diet have not been fully utilized, and glycogen stores have been depleted, body protein has been called upon to supply energy needs.

In the planning of such a patient's diet protein may be included in amounts considerably larger than the accepted subsistence requirement of 1 gram per kilogram of ideal body weight, not only to re-

store and maintain nitrogen equilibrium but also to contribute to energy requirements (since 58 per cent of protein is deaminized and converted to sugar).

As dietary control is established, proteins should be continued in liberal amounts, not in the least as a safety measure. Protein foods are high in satiety value, thus helping prevent "cheating."

Since its proteins possess all of the essential amino acids, meat proves valuable in combatting or preventing nitrogen imbalance and aids in the restoration of the emaciated and debilitated patient. It is also a good source of the B vitamins and contributes to the satisfaction of the increased requirements. It is easily digested and may be prepared in many ways, thus fostering good appetite. Meat can play an important role in the dietary of diabetes mellitus.



The Seal of Acceptance denotes that the statements made in this advertisement are acceptable to the Council on Foods and Nutrition of the American Medical Association.

**American Meat Institute
CHICAGO**

FOR MANAGEMENT OF
Cough

To control the cough reflex and stimulate expectoration, this tested prescription provides simple, competent medication . . . 40 grs. potassium guaiacol-sulfonate and 1 gr. codeine phosphate per fluidounce.

Trade Mark "Thiate" Reg. U. S. Pat. Off.

THIATE
Brand of Expectorant
WITH CODEINE

THE WM. S. MERRELL COMPANY
Cincinnati, U. S. A.



GOMCO CIRCUMCISION CLAMPS

The profession is turning more and more to this new, yet proven method: a bloodless circumcision technique. Gomco Circumcision Clamps greatly simplify the operative procedure on newborns or adults—require less time—give clean-cut incisions which seal in 24 hours. No sutures needed with newborn. Danger of infection greatly reduced. Used by thousands of physicians.

GOMCO
SURGICAL MANUFACTURING CORP.
73 Ellicott Street, Buffalo, N. Y.

secretary in collecting. Here what can be done by the physician himself:

Let's assume that the visit is completed and that a new patient of unproven solvency is departing without mention of money. There is nothing in either the code of ethics or the canons of good taste to prevent you from remarking equitably, "That will be \$5." A simple a statement as this will produce good results.

If the departing patient appears to require extra-punctilious handling, you can still say, "The fee for this visit will be \$5. Shall I send a bill—or would you care to settle it now?" With a partially filled-out receipt to suggest the expected answer and a smile to indicate good-will, this approach will cause no offense—and it will often bring payment.

Some doctors use a well-known comment which runs something like this: "Why not pay now? It saves bookkeeping, and I don't like to bother with bookkeeping. Though habitual with several of my colleagues, this seems to me to have a patronizing sound about it. To overlook the "you" point of view. Perhaps it can be said in a way which won't offend—but not doubt it.

Almost if not quite in the same category is this one: "Why not pay now? Then neither of us will have to give any thought to the bill." An approach such as this may be useful in eliciting cash on the spot. But unless your personality is a lot more winning than

Ketochlor
a "flushing" secretion

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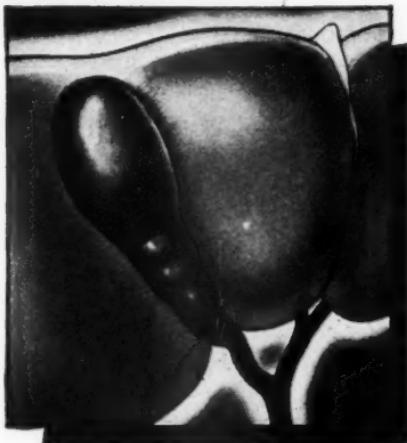
1 or 2

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ETHIC

New Yo



Irrigating THE GALL BLADDER TO OVERCOME STASIS

Ketochol, one of the many outstanding Searle Research developments, exerts a "flushing" action in the gall bladder and bile ducts by promoting the secretion of thin, free-flowing bile by the liver.

The entire biliary tract is thereby drained non-surgically, stasis is overcome, and congestion is materially reduced.

Ketochol is a combination of the oxidized or keto form of those bile ACIDS (cholic, desoxycholic, chenodesoxycholic and lithocholic), normally present in human bile. In the oxidized form they are relatively non-toxic.

INDICATIONS:

Cholecystitis (chronic, subacute), cholangitis, hepatitis, cirrhosis.

AVERAGE DOSE:

1 or 2 Ketochol tablets 3 times daily.

HOW SUPPLIED:

Bottles of 100 and 500 tablets.

G.D. SEARLE & CO.

ETHICAL PHARMACEUTICALS SINCE 1888

CHICAGO

New York Kansas City San Francisco



KETOCHOL



S E A R L E

most, I don't recommend it.

There are of course several "don't's" which hedge the management of a cash-collection policy. For instance:

It's obviously undesirable to use the more stringent approaches on well-known, certain-to-pay patients. It's equally unwise ever to permit any deviation from a uniformly pleasant manner. Another hazard to guard against is any lapse into the vaguely reticent timidity which some doctors use in saying: "Would you prefer, um, to pay now or, ah, shall I send a bill?"—thereby almost certainly persuading the patient to reply, "Oh, send a bill."

Aside from the right phrase at the right time, there are other expedients which can be used to cut down on the extension of credit. One such device is to offer a discount as an incentive for cash payment. A colleague of mine let it be known, through a line printed on his billhead, that he would give a 10 per cent discount on all fees paid at the time the service was rendered. He tells me:

"I tried this on the theory that

if discounts are of value in settling large, long-overdue debts they ought to be helpful in collecting on the spot. It has worked fairly well. The only change I made since I instituted the system has been to exclude simple office visits from the provision. It is too cumbersome to collect \$2 for a \$3 visit."

Less favorable were the findings of another friend who told me: "I've given up the discounts with all but large fees. To some patients it seemed commercially sounding. It occasionally led to chiselling. Certain patients got the idea that the fee could be haggled over—that it was just an asking price to start off the bargaining."

There's little question that discounts are a legitimate and acceptable device for collecting good-sized accounts which are beginning to age. Whether they are of particular value in increasing spot collections, though, seems doubtful.

Occasionally a physician takes his collection problem by the horns and announces that forthwith office calls will be stri-



"Our Sterilizer Gets Fresh Water Every Morning"

ESPECIALLY in these times of straits, your Pelton Sterilizer should start its work with fresh, clean water. That means quick, more effective sterilizing action. And less mineral deposit on instruments and boil-

ers. LEEMAN & CO., Detroit



Satisfies the Demand FOR LOCAL THERAPY

While systemic measures are indicated in neuralgia, myositis, and arthritis, local therapy must also be provided, not only because of its valuable contribution, but to satisfy the patient's demand. For this purpose, Baume Bengué possesses several advantages. Its contained menthol and methyl salicylate induce intense active hyperemia, thus aiding in removing local metabolites and lessening pain and inflammation. A significant amount of salicylate is absorbed through the skin, thus augmenting the influence of orally administered analgesics.

Baume Bengué'
ANALGÉSIQUE

DR. LEEMING & CO., INC., 101 WEST 31ST STREET, NEW YORK, N. Y.

CAMPHO-PHENIQUE



for cash. Some practitioners experimented with the idea during the depression, when credit losses often rose to fantastic heights. As far as I can gather, the experience was not especially favorable. There are evidently several disadvantages: (1) The policy is difficult to carry out uniformly; strict adherence to the rule is frequently impolitic if not unprofessional; and (3) the increased percentage of collection is often balanced by the risk of lost goodwill and perhaps lost patients.

In my opinion the most practicable and effective way to achieve cash collections is to use the pedients indicated earlier. Perhaps you object, "That's all well, but my practice is different. What can be done in operating cases or home visits for instance?"

It's true that there are substantial collection advantages in some branches of medicine, and collection handicaps in others. But the differences among them, I find, are less extreme than is generally assumed. Because surgeons obviously cannot collect for, say, hysterectomy at the time the

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Through national ing 17, Hygeia o this imp nursing where.

RUBBER ES Urge your the life of serve rubber nipple for c immediate ng excessiv

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2 Famili nipple h tends to milk, h sucking.

3 Sanit

Heartburn

Faster relief with a soda tablet that tastes like candy

Samples on request

Thousands of doctors are now prescribing a 6 grain tablet of sodium bicarbonate aromatics called Carbex Bell. They get better results because Carbex Bell is so soluble the patient isn't aware he is taking it. Doctors know there is no question of acid rebound, laxation or constipation at 30 grain dosage. One trial proves its value. Samples from Hollings Smith Inc., Mfg. Chemists, Orangeburg, N.Y.

Again in 1943, Hygeia advertising says,

"CONSULT YOUR DOCTOR REGULARLY"

Through its advertising in national magazines reaching 17,000,000 families, Hygeia continues to bring this important message to nursing mothers everywhere.

RUBBER ESSENTIAL FOR THE WAR

Urge your patients to prolong the life of nipples and thus preserve rubber by using a separate nipple for each feeding, cleaning immediately after use, and avoiding excessive boiling in sterilizing.



SIX FEATURES THAT MAKE THE HYGEIA BOTTLE AND NIPPLE WORTHY OF YOUR CONFIDENCE

- 1 Wide mouth and rounded interior corners make bottle easy to clean and leave no crevices for dirt which breeds germs.
- 2 Famous Hygeia breast-shaped nipple has patented air vent which tends to maintain steady flow of milk, helping to prevent "wind-sucking."
- 3 Sanitary tab makes nipple easy to apply without touching sterilized surface with fingers.
- 4 Improved tapered shape makes it easier for baby to hold bottle and get last drop of formula.
- 5 Measuring scale applied in color makes it easy to observe amount of formula.
- 6 Wide base makes for safer handling in filling and attaching nipple.

Hygeia Nursing Bottle Co., Inc., Buffalo, N. Y.

**HYGEIA NURSING BOTTLE
AND NIPPLE**
Safer because easier to clean

ice is rendered, it is sometimes inferred that pay-as-you-go devices have less place in their practices than in those of ophthalmologists, pediatricians, and ENT men. The point is not, I think, wholly valid.

A more accurate comparison lies in types of cases rather than types of practices. Naturally major operations do not always belong in the spot-cash category, and it is admittedly less easy to collect at the time for a home visit than for an office call. But the fee for an operation should always be a matter for careful pre-arrangement, while illnesses requiring home visits are often terminated by office check-ups. It is in relation to office calls generally—whatever your specialty—that credit can most effectively be translated into cash. Immediate collection is especially appropriate in cases where the patient has received a specific, concrete service—say a physical examination, injection, X-rays, refraction, dressing, or minor operative procedure.

Often it's possible to adapt to your individual practice the techniques which have given some

specialties a reputation for excellent collections. To illustrate:

Recently I asked a roentgenologist why his specialty is reputed to have a high cash-collection percentage. "One reason, I suppose, is that it's a referral specialty, and another is that the patient gets something specific and tangible," he said. "But the chief reason is that whenever I suspect I'm likely to get stung for my bill, I tell the patient something like this: Your X-ray films will be ready for you this afternoon. If you stop by about 4 you can pick them up. My fee will be \$12. If it isn't convenient for you to pay me now, you can leave the amount when you get the films."

While this approach is of course unsuited in some cases, it is nevertheless almost a specific for the patient with a confirmed habit of murmuring "Goodness, I must have left my money at home." A moment's thought will suggest many occasions—in cases calling for urinalyses, blood tests, injections, etc.—when the rest of the physician can make similar use of the technique.

—JAMES FLEMING, M.D.

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Exact Fraisse formula, now made here
AMPLE SUPPLIES AVAILABLE

Iron cacodylate 0.01 (1/6 gr.)
Sodium glycerophosphate 0.10 (1 1/2 gr.)
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Before accepting as a fact
that ANY of the products
we distribute are unavailable,
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about 4 you can pick them up
My fee will be \$12. If it isn't con
venient for you to pay me now,
you can leave the amount when
you get the films."

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unsuited in some cases, it is never
theless almost a specific for the
patient with a confirmed habit of
murmuring "Goodness, I must
have left my money at home."

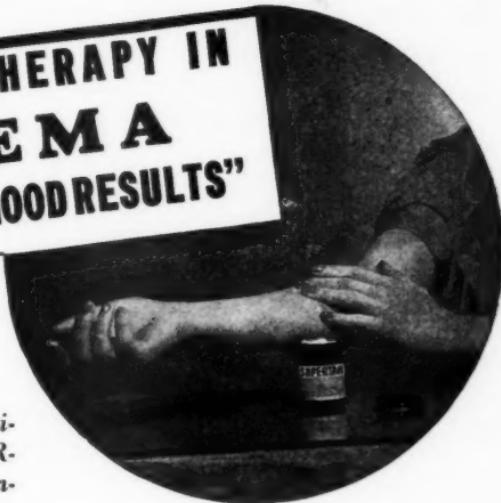
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tions, etc.—when the rest of
the physician can make similar use of the
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Schwarz & R
Skin Disease



**SUPERTAH THERAPY IN
ECZEMA**
yields 88.1% "GOOD RESULTS"



by almost 9 out of 10 physi-
cians prescribing SUPER-
TAH (Nason's white, non-
staining, nearly odorless con-
centrate of black coal tar)

or Eczema report "GOOD
RESULTS." This was de-
termined by a cross-section
of U.S. doctors made
for us by an independent
research agency.

There are good reasons why
SUPERTAH is preferred to the
injurious black tar:

(1) Clinical findings* show
that clean white SUPERTAH re-
tains the beneficial therapeutic
effects of black crude tar, free
from any objectionable features.

Swartz & Reilly, "Diagnosis and Treatment
Skin Diseases", p. 66.

(2) SUPERTAH does not ir-
ritate even the delicate skin of an
infant, nor cause pustulations or
other dermatitis as crude tar
sometimes does.

(3) Most important, SUPER-
TAH is used by the patient be-
cause it is free of the objection-
able odor . . . the repulsive black
color . . . the linen and clothing-
staining disadvantages of crude
tar preparations, which, all too
often, prompts the patient to skip
their use, to leave them unopened
on the bathroom shelf. SUPER-
TAH is used—used as you direct.

SUPERTAH

(NASON'S)

TAILBY - NASON COMPANY. Boston, Mass.

Kendall Square Station

MAKERS OF "SPHINX" BRAND OF RELIABLE PHARMACEUTICALS SINCE 1905

Do your patients have—



HAIR AND SCALP PROBLEMS?

In many hair and scalp conditions, the physician may wish to supplement systemic therapy with helpful local treatments. For these cases, Parker Herbex provides rationally formulated medical products and a scientifically devised method of application—to be followed either by the office nurse, by a salon attendant, or by the patient. The 117-page handbook on "The Hair and Scalp" reviews the pathologies involved, concisely and authoritatively—with step-by-step instructions for treatment. It is available exclusively to the profession, gratis—on individual request.



PARKER HERBEX CORPORATION

607 FIFTH AVENUE

NEW YORK, N. Y.

FOR YOUR CONVENIENCE

PARKER HERBEX CORPORATION
607 Fifth Ave., New York, N. Y.

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Gentlemen: Please send me postpaid, without charge or obligation, a copy of the book, "The Hair and Scalp."

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When NERVES are strained

IN times like these—when many individuals are troubled by anxiety states, fatigue, and insomnia—the soporific and nutritive values of GUINNESS STOUT may be found helpful.

This appetizing, palatable drink relaxes nerves, induces sleep. And, since it is neither pasteurized nor filtered, Guinness retains a maximum of the beneficial qualities of its natural ingredients: barley, hops, spring water and special Guinness yeasts. Valuable nutritional solids retained include the live yeast—a source of Vitamins B₁ and G. Obtainable wherever good ales are sold.

Biochemists' reports on GUINNESS STOUT will be sent to doctors if requested on profes-

sional letterheads. Ask for any or all of these professional bulletins.

1. The Metabolism of Alcohol
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WRITE TO: American Correspondent, A. Guinness, Son & Co., Ltd., Dept. ME-308, 501 Fifth Avenue, New York, N. Y. (Sole Dist. for U. S. A., G. F. Heublein & Bro., Hartford, Conn.) GU 308-M

GUINNESS IS GOOD FOR YOU



IRON THERAPY

HEMATOLOGISTS agree that, for best results in hypochromic anemia, iron medication should be continued for some time after the hemoglobin value and reticulocyte count return to normal.

Under such extended therapy, the importance of a palatable, nonirritant, ferruginous tonic, free from unpleasant side-effects (such as "indigestion," diarrhea or constipation, or staining of the teeth), becomes self-evident.

In selecting Gude's Pepto-Mangan, the physician is assured of a markedly potent hematopoietic stimulant—particularly suited to extended employment because of its agreeable taste and nonirritant blandness.

Its iron and manganese are rendered fully assimilable by organic combination in peptonate form with predigested albumin. Its clear, dark, sherry color, its neutral reaction, and its mild aromatic flavor have an immediate appeal for young or old. Or (if preferred) it may be administered in tablet form.

Indications — For hypochromic conditions however manifested: in pregnancy, during convalescence, following operations, prolonged fevers, sulfa drug therapy, blood donations, and for children during periods of rapid growth and adolescence, and for the aged.

Formula — Each tablespoonful (15 grams) contains .2745 grams of peptonate of iron and .0973 grams of peptonate of manganese. Alcohol 16%.

Supplied — In bottles of 11 fl. oz.; or boxes of 60 tablets (separately wax-paper wrapped). M. J. BREITENBACH CO., 304 E. 23rd St., N. Y. C.

**GUDE'S
PEPTO - MANGAN**
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